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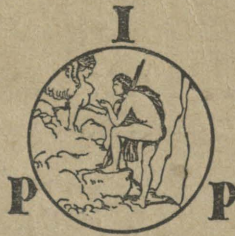
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VOLUME I

1920

NUMBER 2

THE PSYCHOGENESIS OF A CASE OF FEMALE HOMOSEXUALITY

by

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I.

Homosexuality in women, which is certainly not less common than in men, although much less perturbing, has not only been ignored by the law, but has also been neglected by psycho-analytic research. The narration of a single case, not too pronounced in type, in which it was possible to trace with certainty and completeness the history of its psychical development, may, therefore, have a certain claim on our attention. If the presentation sets forth only the most general outlines of the various events concerned and the conclusions reached from study of the case, suppressing all the characteristic details on which the interpretation is founded, this limitation is easily to be explained by the medical discretion called for in discussing a recent case.

A beautiful and clever girl of eighteen, belonging to a family of good standing, had aroused displeasure and concern on the part of her parents by the tender passion with which she pursued a certain lady, about ten years older than herself. The parents asserted that this lady, in spite of her distinguished name, was no better than a cocotte. It was said to be a well-known fact that she lived with a married woman-friend, having intimate relations with her, while at the same time she carried on promiscuously with

a number of men. The girl did not contradict these evil reports, but she continued to be none the less enamoured of the lady in question, although she herself was by no means lacking in a sense of decency and propriety. No prohibitions and no supervision hindered the girl from seizing every one of the rare opportunities of being together with her beloved friend, of ascertaining all her habits, of waiting for her for hours outside her door or at a tram halt, of sending her gifts of flowers, and so on. It was evident that this one interest had swallowed up all others. The girl did not concern herself with any further educational studies, placed no value on social functions or girlish pleasures, and kept up relations only with those friends who could help her in the matter or serve as confidantes. The parents could not say to what lengths their daughter had gone in her relations to the questionable lady, or whether the limits of devoted admiration had already been exceeded. They had never remarked in their daughter any interest in young men, nor any pleasure at their attentions, and, on the other hand, they were quite sure that her present attachment for a woman was only a continuation in a marked degree of the feeling she had displayed of recent years for other members of her own sex, which had already aroused her father's suspicion and severity.

Two aspects of her behaviour, in apparent contrast with each other, her parents took especially badly. On the one hand, that she did not scruple to appear in the most frequented streets in the company of her questionable friend, being thus quite neglectful of her own reputation; while, on the other hand, she disdained no means of deception, no excuses, and no lies that would make meetings with her possible and cover them. She was thus as brazen in the one respect as deceitful in the other. One day it happened, as, indeed, was sooner or later inevitable in the circumstances, that the father met his daughter in the company of the lady. He passed them by with an angry glance which boded no good. Immediately after the girl rushed off and flung herself over a neighbouring wall on to the railway line. She paid for this undoubtedly serious attempt at suicide with a long stay in bed, though fortunately little permanent damage was done. After her recovery she found it easier to get her own way than before. The parents did not dare to oppose her so vigorously, and the lady, who up till then had coldly declined her advances, was moved by such

an unmistakable proof of serious passion and began to treat her in a more friendly manner.

About six months after this occurrence the parents sought medical advice and entrusted the doctor with the task of bringing their daughter back to the normal. The girl's attempted suicide had shown them that all the means of discipline at their disposal were powerless to overcome her mental disorder. Before going further it will be desirable to deal with the attitudes of the father and mother separately. The father was an earnest and worthy man, at bottom very tender-hearted, but by the sternness he had adopted he had somewhat estranged his children. His treatment of his only daughter was too much influenced by consideration for his wife. When he first came to know of his daughter's homosexual tendencies he boiled over with anger and tried to suppress them by threats; at that time he perhaps hesitated between different, though equally painful, views, whether to regard her as vicious, as degenerate, or as mentally afflicted. Even after the attempted suicide he did not achieve the lofty resignation shown by one of our medical colleagues who remarked of a similar case in his own family, "It is just a misfortune like any other". There was something about his daughter's homosexuality that aroused the deepest bitterness in him, and he was determined to combat it with all the means in his power; the depreciation of psycho-analysis so widespread in Vienna did not prevent him from turning to it for help. If this way failed he still had in reserve the strongest counter-measure; a speedy marriage was to awaken the natural instincts of the girl and stifle her unnatural tendencies.

The mother's attitude towards the girl was not so perspicuous. She was still a youngish woman, who was evidently unwilling to relinquish her claims to charm by her beauty. All that was clear was that she did not take her daughter's passion so tragically as did the father, nor was she so incensed at it. She had even for a long time enjoyed her daughter's confidence concerning the love affair, and her opposition to it seemed to have been aroused mainly by the harmful openness with which the girl publicly displayed her feelings. She had suffered for some years from neurotic troubles and enjoyed great consideration from her husband; she was very erratic in her treatment of her children, rather hard towards her daughter and over-indulgent to her three sons, the youngest of whom had been born after a long interval and was

not yet three years old. It was not easy to ascertain anything more definite as to her character, for, owing to motives that will only later become intelligible, the patient was always reserved in the accounts she gave of her mother, in contradistinction to those relating to her father.

The doctor who was to undertake the psycho-analytic treatment of the girl had several reasons for feeling uncomfortable. The situation he had to deal with was not one such as analysis demands and where alone it can demonstrate its effectiveness. As is well known, the ideal situation for analysis is when someone, otherwise master of himself, is suffering from an inner conflict which he is unable to resolve alone, so that he brings his trouble to the analyst and begs for his help. The doctor then works hand in hand with one part of the dissociated personality against the other partner in the conflict. Situations other than these are more or less unfavourable for psycho-analysis; they add other difficulties to those already present. Situations such as those of the proprietor who orders an architect to build him a villa according to his own tastes and desires, or of the pious donor who gets the artist to paint a picture of saints in the corner of which is to be a portrait of himself worshipping, are fundamentally incompatible with the conditions of psycho-analysis. It constantly happens that a husband informs the doctor, "My wife suffers from nerves, so that she gets on badly with me; please cure her, so that we may lead a happy married life again". But often enough it turns out that such a request is impossible to fulfil, *i. e.* that the doctor cannot bring about the result for which the husband sought the treatment. The moment the wife is freed from her neurotic inhibitions she insists on dissolving the marriage, for the maintenance of which the neurosis was essential. Or, to take another case, parents demand that their nervous and unruly child be cured. By a healthy child they mean one who gives his parents no difficulties, but only pleasure. The doctor may succeed in curing the child, but after that it goes its own way all the more decidedly, and the parents are now more dissatisfied than even before. In short, it is not a matter of indifference whether someone comes to analysis of his own accord or because he is brought to it, whether he himself desires to be changed or only his relatives who love him (or who might be expected to love him) desire this for him.

Further unfavourable features in the present case were the facts that the girl was not exactly a "patient" — her suffering had no inner source, nor did she complain of her condition — and that the task to be carried out did not consist in resolving a neurotic conflict but in converting the one variety of the genital organisation of sexuality into the other. The removal of genital inversion, or homosexuality, is in my experience never an easy matter. I have rather found that success is possible only under specially favourable circumstances, and even then that it essentially consists in being able to open to the restricted homosexuals the way to the opposite sex, till then barred, thus restoring their full bisexual functions. After that it lay with themselves to choose whether they wished to abandon the other way, banned by society, and in individual cases they have done so. One must remember that in normal sexuality also there is a limitation in the choice of object; in general to undertake to convert a fully developed homosexual into a heterosexual is not much more promising than to do the reverse, only that for good practical reasons the latter is never attempted.

In actual numbers the successes achieved by psycho-analytic treatment of the manifold forms of homosexuality are not specially striking. As a rule the homosexual is not able to give up his pleasure-object, and one cannot convince him that if he changed to the other object he would find again the pleasure he has renounced. If he comes at all to be treated it is mostly through the pressure of external motives, such as the social disadvantages and dangers attaching to his choice of object, and such components of the instinct for self-preservation prove to be too weak in the struggle against the sexual impulses. One then soon discovers his secret plan, namely, to obtain from the striking failure of his attempt the feeling of satisfaction that he has done everything possible against his abnormality, to which he can now resign himself with an easy conscience. The case is somewhat different when consideration for beloved parents and relatives has been the motive for his attempt to be cured. Then there really are libidinous tendencies present which may develop energies opposed to the homosexual choice of object, though their strength is rarely sufficient. It is only where the homosexual fixation has not yet become strong enough, or where there are considerable rudiments and remains of the heterosexual choice of object, *i. e.* in a still

oscillating or in a definitely bisexual organisation, that one may make a more favourable prognosis for the psycho-analytic therapy.

For these reasons I altogether refrained from holding out to the parents a prospect of their wish being fulfilled. I merely said I was prepared to study the girl carefully for a few weeks or months so as to be able then to pronounce how far a continuation of the analysis might influence her. In a considerable number of cases, indeed, the analysis divides itself into two clearly separated stages: in the first one the doctor procures from the patient the necessary information, makes him familiar with the premises and postulates of psycho-analysis, and unfolds to him the rendering of the genesis of his disorder, as deduced from the material brought up in the analysis. In the second stage the patient himself lays hold of the analytic material, works on it, recollects what he can from the apparently repressed memories, and tries to live over again the rest. In this way he can confirm, supplement, and correct the inferences made by the doctor. It is only during this work that he experiences, through overcoming resistances, the inner change aimed at, and acquires for himself the convictions that make him independent of the doctor's authority. These two stages in the course of the analytic treatment are not always sharply divided from each other; it only happens when the resistance keeps to certain conditions. But when this is so, one may institute a comparison with two corresponding stages of a journey. The first comprises all the necessary preparations, to-day so complicated and hard to effect, till at last, ticket in hand, one goes on to the platform and secures a seat in the train. One has now the right, and the possibility, to travel into the distant country, but after all these preliminary exertions one is not yet there — indeed, one is not a single kilometer nearer one's goal. For this to happen one has to make the journey itself from one station to another, and this part of the travel may well be compared with the second stage in the analysis.

The analysis of the patient referred to took the course of this two-stage schedule, but it was not continued beyond the beginning of the second stage. A special constellation of the resistance, made it possible, nevertheless, to gain full confirmation of my inferences, and to obtain a fairly adequate insight into the way in which her inversion had developed. But before narrating the findings of the analysis I have to deal with a few points which have either been

touched upon already by myself or which will have at once struck the reader as interesting.

I had made the prognosis partly dependent on how far the girl had got in the satisfaction of her passion. The information I gleaned during the analysis seemed favourable in this respect. With none of the objects of her passion had the patient enjoyed anything beyond a few kisses and embraces; her genital chastity, if one may use such a phrase, had remained intact. As for the demi-mondaine who had aroused the girl's most recent, and by far her strongest, emotions, she had always treated her coldly and had never allowed any greater favour than the kissing of her hand. Probably the girl was making a virtue of necessity when she kept insisting on the purity of her love and her physical repulsion against the idea of sexual intercourse. But perhaps she was not altogether wrong when she boasted of her wonderful beloved that, although of noble birth and forced into her present position only by adverse family circumstances, she had preserved, even in such a situation, a great deal of dignity. For the lady used to recommend the girl, every time they met, to withdraw her affection from herself and from women in general, and she had persistently rejected the girl's advances up to the time of the attempted suicide.

A second point, which I next tried to clear up, concerned the girl's own motives on which the psycho-analytic treatment might be based. She did not try to deceive me by saying that she felt any urgent need to be freed of her homosexuality. On the contrary, she said she could not conceive of any other way of being in love, but she added that for her parents' sake she would honestly help in the therapeutic endeavour, for it pained her very much to be the cause of so much grief to them. I had to take this also as a propitious sign to begin with, as I could not suspect what unconscious affective attitude lay behind it. What came to light later in this connection decisively influenced the course taken by the analysis and determined its premature conclusion.

Readers unversed in psycho-analysis will long have been impatiently awaiting an answer to two other questions. Did this homosexual girl show somatic characteristics plainly belonging to the opposite sex, and did the case prove to be one of congenital or of acquired (later developed) homosexuality?

I am aware of the importance attaching to the first of these questions. Only one should not exaggerate it, and obscure in its

favour the facts that sporadic secondary characteristics of the opposite sex are very often present in normal individuals, and that well-marked somatic characteristics of the opposite sex may be found in persons whose choice of object has undergone no change in the direction of inversion; in other words, that in both sexes *the degree of physical hermaphroditism is to a great extent independent of the psychical hermaphroditism*. In modification of this statement it must be added that this independence is more evident in men than in women, where bodily and mental traits belonging to the opposite sex are apt to coincide in their incidence. Still I am not in a position to give a satisfactory answer in the case of my patient to the first of our questions; the psychoanalyst often foregoes a thorough bodily examination of his patients in certain cases. Certainly there was no obvious deviation from the feminine physical type, nor any menstrual disturbance. The beautiful and well-developed girl had, it is true, her father's tall figure, and her facial features were sharp rather than soft and girlish, traits which might be regarded as indicating a physical masculinity. Some of her intellectual attributes also could be connected with masculinity: for instance, her acuteness of comprehension and her lucid objectivity, in so far as she was not dominated by her passion; though these distinctions are conventional rather than scientific. What is certainly of greater import is that in her behaviour towards her love-object she had approximated throughout to the masculine type: that is to say, she manifested the humility and the tremendous over-estimation of the sexual object so characteristic of the male lover, she renounced all narcissistic satisfaction, and she preferred to be the lover rather than the beloved. She had thus not only chosen a feminine love object, but had also developed a masculine attitude towards this object.

The second question, whether this was a case of inherited or acquired homosexuality will be answered by the whole history of the patient's trouble and its development. The study of this will show how far this very question is fruitless and inappropriate.

II.

After such a digressive introduction the sexual history of the case under consideration can be presented quite concisely. In childhood the girl had quietly passed through the normal stage

of the feminine Oedipus complex¹, and had later also begun to replace her father by a brother slightly older than herself. She could not remember any sexual traumata in early life, nor were any discovered by the analysis. Comparison of her brother's genital organs and her own, an event which took place about the beginning of the latency period (at five years old or perhaps a little earlier), left a strong impression on her and had far-reaching after-effects. There were only slight hints pointing to infantile onanism, or else the analysis did not go deep enough to throw light on this point. The birth of a second brother when she was between five and six years old had apparently no special influence upon her development. During school life and early adolescence she gradually became acquainted with the facts of sex and she received this knowledge with lubricity and shocked aversion, a reaction which might be called normal and not exaggerated. This amount of information seems meagre enough, nor can I guarantee that it is complete. It may be that the history of her youth was, in reality, richer in experiences; I do not know. As I have already said, the analysis was broken off after a short time, and yielded therefore an anamnesis not much more reliable than the other anamneses of homosexuals, which there is good cause to question. Further, the girl had never been neurotic, and came to the analysis without any hysterical symptom, so that one could not so soon find reasons for investigating the history of her childhood.

At the age of thirteen to fourteen she displayed a tender and, according to general opinion, exaggeratedly strong affection for a small boy, not quite three years old, whom she used to see regularly in a playground of one of the parks. She took to the child so warmly that in consequence a lasting friendly relationship sprang up between herself and his parents. One may infer from this episode that at that time she was possessed of a strong desire to be a mother herself and to have a child. However, after a short time she grew indifferent to the boy and began to take an interest in mature, but still youthful, women, the manifestations of which soon led to a painful chastisement being administered by her father.

The fact was established beyond doubt that this change occurred simultaneously with a certain event in the family, and one may

¹ I do not see any progress or advantage in the introduction of the term "Electra-complex", and do not advocate its use.

therefore look to this for some explanation of the change. Before it happened, her libido was focussed on motherhood, while afterwards she was a homosexual attracted to mature women, and remained so ever since. The event referred to, which is so significant for our understanding of the case, was a further pregnancy of her mother, and the birth of a third brother, when she was about sixteen.

The concatenation I shall now proceed to discover is not a product of my synthetizing faculty; it is based on such trustworthy analytical evidence that I can claim objective validity for it; it was in particular a series of inter-related dreams, easy of interpretation, that proved decisive in this respect.

The analysis revealed beyond all shadow of doubt that the beloved lady was a substitute for — the mother. It is true that she herself was not a mother, but then she was not the girl's first love. The first objects of her affection after the birth of her youngest brother were really mothers, women between thirty and thirty-five whom she had got to know with their children during summer holidays or in the family circle in town. The "love-condition" of motherhood was later on given up because it proved incompatible in real life with another one, which grew more and more important. The specially intensive fixation on her latest love, the "Lady", had still another basis, which the girl discovered quite easily one day. The lady, on account of her slender figure, regular beauty, and off-hand manner, reminded her of her own brother, a little older than herself. Hence her latest choice corresponded not only with her feminine, but also with her masculine ideal; it combined the gratification of the homosexual tendency with that of the heterosexual one. It is well-known that analysis of male homosexuals has in numerous cases revealed the same combination, which should admonish us not to form too simple a conception of the nature and genesis of inversion, and not to forget the general bisexuality of mankind.

But how are we to understand the fact that it was the birth of a late-comer in the family, when the girl herself was already mature and had strong wishes of her own, that moved her to bestow her passionate tenderness upon the child-bearer, *i. e.* her own mother, and to express that feeling towards a substitute for her mother? From all that we know we should have expected just the opposite. In such circumstances mothers, with daughters of

about a marriageable age, usually feel embarrassed in regard to them, while the daughters are apt to feel for their mothers a mixture of compassion, contempt, and envy which certainly does not help to increase their tenderness for them. The girl we are considering had little cause in general to feel affection for her mother. The latter, still youthful herself, saw in her rapidly-developing daughter an inconvenient competitor; she favoured the boys at her expense, limited her independence as much as possible, and kept a strict watch that the girl should not be too much with her father. A yearning for a kinder mother would therefore have been all along quite intelligible, but why it should have flamed up just then, and in the form of a consuming passion, is not comprehensible.

The explanation is as follows: When the girl suffered her disappointment, she was just experiencing the revival of the infantile Oedipus-complex so common at puberty. She was keenly conscious of the wish to have a child, and a male one; that it was to be from her father, and in his image, her consciousness was not allowed to know. And then: it was not she who bore the child, but the unconsciously hated rival, her mother. Exasperated and embittered, she turned away from the father, and from men altogether. After this first great reverse she foreswore her womanhood, and sought another goal for her libido.

In doing so she behaved just as many men do, who after a first painful experience turn their backs for ever upon the faithless sex and become woman-haters. It is related of one of the most attractive and unfortunate princes of our time that he became a homosexual because the lady he was engaged to betrayed him with a stranger. I do not know whether this is true historically, but much psychological truth lies behind the rumour. In all of us, throughout life, the libido normally oscillates between the male and the female object; the bachelor gives up his men friends when he marries, and returns to club-life when married life has lost its savour. Naturally, when the swing over is fundamental and final, we suspect some special factor which has definitely favoured one side or the other, and which perhaps only waited for the appropriate moment in order to bend the choice of object in its direction.

After her disappointment, therefore, the girl had rejected entirely her wish for a child, the love of man, and femininity

altogether. Evidently at this point the possible developments were very manifold; what actually happened was the most extreme possible. She changed into a man, and took her mother in place of her father as her love-object¹. Her relation to her mother had certainly been ambivalent from the beginning, and it proved easy to revive her earlier love for her mother and with its help to over-compensate for her current hostility. Since there was little to be done with the real mother, there arose from the conversion of feeling just described the search for a mother-substitute to whom she could become passionately attached².

From her actual relations to her mother there arose a practical motive furthering the change of feeling, one which perhaps might be called an "advantage of illness" (*Krankheitsgewinn*). The mother herself still attached great value to the attentions and the admiration of men. If, then, the girl became homosexual and left the men to her mother (in other words "evaded the mother"), she removed something which had hitherto been partly responsible for her mother's disfavour³.

¹ It is by no means rare for a love relation to be broken off by means of a process of identification on the part of the lover with the loved object, a process equivalent to a kind of regression to narcissism. After this has been accomplished, it is easy in making a fresh choice of object to apply the libido to a member of the sex opposite to that of the earlier choice.

² The displacements of the libido here described are doubtless familiar to every analyst from the investigation of the anamneses of neurotics. With the latter, however, they occur in early childhood, with the beginning of the love-life; with our patient, who was in no way neurotic, they took place in the first years following puberty, though, by the way, they similarly were wholly unconscious. Perhaps one day this temporal factor may turn out to be of great import.

³ As "evasion" has not previously been mentioned among the causes of homosexuality, or in the mechanism of libido-fixation in general, I will add a similar analytical observation, which has a special feature of interest. I once knew two twin brothers, both of whom were endowed with strong libidinous impulses. One of them was very successful with women and had innumerable affairs with women and girls. The other went the same way at first, but it became unpleasant for him to be trespassing on his brother's beat, and, owing to the likeness between them, to be mistaken for him on intimate occasions, so he got out of the difficulty by becoming homosexual. He left the women, and thus got out of the latter's way ("evaded" him).

Another time I treated a young man, an artist, unmistakably bisexual in disposition, in whom the homosexual trend had won the day simultaneously with a disturbance in his work. He fled from both women and work together.

The attitude of the libido thus adopted was greatly reinforced as soon as the girl perceived how much it displeased the father. Since she was first punished for an over-affectionate overture made to a woman, she realized how she could hurt her father and take revenge on him. Henceforth she remained homosexual out of defiance against her father. Nor did she scruple to lie to him and to deceive him in every way. Towards her mother, indeed, she was only so far deceitful as was necessary to keep her father in the dark. I had the impression that her behaviour followed the principle of the satire: If you have betrayed me, you must put up with my betraying you. Nor can I come to any other conclusion about the striking lack of precaution displayed by this otherwise ingenious and clever girl. She *wanted* her father to know occasionally of her intercourse with the lady, otherwise it would mean her missing the satisfaction of her keenest desire — namely, revenge. So she saw to this by showing herself openly in the company of her adored friend, by taking walks in the streets near her father's place of business, and the like. This maladroitness was by no means unintentional. It was strange, by the way, that both parents behaved as though they understood the secret psychology of their daughter. The mother was tolerant, as though she appreciated as a kindness her daughter's withdrawal from the arena ("evasion"): the father was furious, as though he realized the deliberate revenge directed against himself.

The girl's inversion, however, received its final reinforcement when she found in her "lady" an object which promised to satisfy

The analysis, which was able to bring him back to both, showed that the fear of the father was the most powerful psychic motive! for both the disturbances — which were, really, renunciations. In his imagination all women belonged to the father, and he sought refuge in men from the impulse to give way, so as to "evade" conflict with the father. Such motivation of the homosexual object-choice must be by no means uncommon; in the primaeval ages of race all women presumably belonged to the father and head of the tribe.

Among brothers and sisters who are not twins this "evasion" plays a great part in other spheres as well as in that of the love-choice. For example, the elder brother studies music and is admired for it; the younger, far more gifted musically, soon gives up his own musical studies, in spite of his longing, and cannot be persuaded to touch an instrument again. This is one example of a very frequent occurrence, and the investigation of the motives leading to "evasion" rather than to open rivalry discloses very complicated psychical conditions.

not only her homosexual tendency, but also that part of her heterosexual libido still attached to her brother.

III.

Consecutive presentation is not a very adequate means of describing complicated mental processes going on in different layers of the mind. I am therefore obliged to pause in the discussion of the case and treat more fully and deeply some of the points brought forward above.

I mentioned the fact that the girl's relation to her adored lady resembled that characteristic of the masculine type of love. Her humility and her tender lack of pretension "*che poco spera e nulla chiede*", her bliss when she was allowed to accompany the lady a little way and to kiss her hand on parting, her joy when she heard her praised as beautiful — anyone else's recognition of her own beauty meaning nothing at all to her —, her pilgrimages to places once visited by the loved one, the oblivion of all more sensual wishes: all these little traits in her resembled the first enthusiastic passion of a youth for a celebrated actress whom he regards as far above him, to whom he scarcely dares lift his bashful eyes. The correspondence with the "type of masculine object-choice" I have previously described, whose special features I traced to the attachment to the mother¹, held good even in the details. It may seem remarkable that she was not in the least repelled by the evil reputation of her beloved one, although her own observations sufficiently confirmed the truth of such rumours. She was after all a well brought-up and modest girl, who had avoided sexual adventures herself, and who regarded coarsely sensual gratification as unaesthetic. But already her first passions had been for women who were not celebrated for specially strict propriety. The first protest her father made against her love-choice had been evoked by the pertinacity with which she sought the company of a cinematograph actress at a summer resort. In all these affairs it had never been a question of women who had any reputation for homosexuality, and who might, therefore, have offered her some prospect of homosexual gratification; on the contrary, she illogically courted women who were coquettes in the

¹ Sammlung kl. Schriften zur Neurosenlehre, 4. Folge, 1918.

ordinary sense of the word, and she rejected without hesitation the willing advances made by a homosexual friend of her own age. The "lady's" bad reputation, however, was positively a "love-condition" for her, and all that is enigmatical in this attitude vanishes when we remember that in the case also of the masculine type of object-choice derived from the mother it is an essential condition that the loved object should be somehow or other "in bad repute sexually", one who really may be called a *cocotte*. When the girl learnt later on how far the evil reputation of her adored lady was justified and that she lived simply from the giving of bodily favours, her reaction consisted in great compassion and in the development of phantasies and plans for "rescuing" her beloved from these ignoble circumstances. We have been struck by the same "rescuing" endeavours in the men of the type referred to above, and in my description of it I have tried to give the analytical derivation of this tendency.

We are led to quite another realm of explanation by the analysis of the attempt at suicide, which I must regard as seriously intended, and which, by the way, considerably improved her position both with her parents and with the beloved lady. She went for a walk with her one day in a neighbourhood and at an hour at which she was not unlikely to meet her father on his way from his office. So it turned out. Her father passed them in the street and cast a furious look at her and her companion, who was known to him. A few moments later she flung herself on to the railway cutting. The explanation she gave of the more intimate factors determining her resolution sounded quite plausible. She had confessed to the lady that the gentleman who had given them such an irate glance was her father, and that he had absolutely forbidden their friendship. The lady flared up at this and ordered the girl to leave her then and there, and never again to wait for her or to address her, as the affair must now come to a close. In despair that she had now lost her loved one for ever, the girl wanted to put an end to herself. The analysis, however, was able to disclose another, and deeper, interpretation behind the one she gave, and to confirm it by investigation of her dreams. The attempted suicide was, as might have been expected, determined by two other factors: a "punishment-fulfilment" (self-punishment), and a wish-fulfilment. The latter signified the attainment of the same wish the disappointment of which had driven her

into homosexuality — namely, the wish to have a child by her father, for now she “fell”¹ through her father’s fault².

The fact that at this moment the lady had spoken to the same effect as the father had, and had uttered the same prohibition, forms the connecting link between this deeper interpretation and the superficial one of which the girl herself was conscious. From the point of view of self-punishment the girl’s action proves that she had developed in her unconscious strong death-wishes against one or other of her parents: perhaps against her father, out of revenge for his impeding her love; or, more likely, against her mother also when she was pregnant with the little brother. For analysis has thrown the following light on the enigma of suicide: probably no one finds enough psychical energy to kill himself unless, in the first place, he in doing so is at the same time killing an object with whom he has identified himself, and, in the second place, is turning against himself a death-wish which had been directed against someone else. Nor need the regular discovery of these unconscious death-wishes in would-be suicides surprise us as strange (any more than it need make an impression as confirming our deductions), since the unconscious of all human beings is full enough of such death-wishes, even against those we love³. In the girl’s identification with her mother who ought to have died at the birth of the child denied to herself, this “punishment-fulfilment” itself is again a “wish-fulfilment”. Lastly, the fact that the most manifold strong motives must have cooperated to make possible such a deed is quite in keeping with what we would expect.

In the girl’s account of her conscious motives the father did not figure at all; even her fear of his anger was not mentioned. In the motivation laid bare by the analysis he played the principal part. Her relation to her father had the same decisive importance for the course and outcome of the analytic treatment, or rather exploration. Behind the pretended consideration for her parents, for whose sake she had been willing to make the attempt to be

¹ [In the text there is a play on the word “niederkommen”, which means both “to fall” and “to be delivered of a child”. Transl.]

² That the various means of suicide can represent sexual wish-fulfillments has long been known to all analysts. (To poison = to be pregnant; to drown = to bear a child; to throw oneself from a height = to be delivered of a child.) I do not know where they were first published.

³ Cp. “Zeitgemäßes über Krieg und Tod”, *Imago*.

transformed, was concealed the attitude of defiance and revenge against the father which bound her to homosexuality. Secure under this cover, the resistance left a considerable sphere free for analytic investigation. The analysis went forward almost without any signs of resistance, the patient actively participating intellectually, though absolutely tranquil emotionally. Once when I expounded to her a specially important part of the theory, one touching her nearly, she replied in an inimitable tone, "Oh, how interesting", as though she were a *grande dame* being taken over a museum and glancing through her lorgnon at objects to which she was completely indifferent. The impression one had of her analysis was not unlike that of an hypnotic treatment, where the resistance has in the same way withdrawn to a certain limit beyond which it then proves to be unconquerable. The resistance very often pursues similar tactics — Russian tactics, as they might be called — in cases of the obsessional neurosis, which for this reason yield the clearest results for a time and permit of a penetrating glimpse into the causation of the symptoms. One begins to wonder how it is that such marked progress in understanding of the analytic procedure can be unaccompanied by even the slightest change in the patient's compulsions and inhibitions, until at last one perceives that everything accomplished had been admitted only under the mental reservation of doubt¹, and behind this protective barrier the neurosis may feel secure. "It would be all very fine", thinks the patient, often quite consciously, "if I were obliged to believe what the man says, but there is no question of that, and so long as that is not so I need change nothing". Then, when one comes to close quarters with the motivation of this doubt, the fight with the resistances breaks forth in earnest.

In the case of our patient, it was not doubt, but the affective factor of revenge on her father that made her cool reserve possible, divided the analysis into two distinct stages, and rendered the results of the first stage so complete and perspicuous. It seemed, further, as though nothing resembling a transference to the doctor had been brought about. That, however, is of course absurd, or, at least, a loose way of expressing it; for some kind of relation to the doctor must come about, and this is mostly transferred from an infantile one. In reality she transferred to me the deep antipathy to men which had dominated her ever since the disappoint-

¹ [*i. e.* believed on condition that it is regarded as not certain. Transl.]

ment she had experienced through her father. Bitterness against men is as a rule easy to gratify with the doctor; it need not evoke any violent emotional manifestations, it simply expresses itself in rendering futile all his endeavours and in clinging to the neurosis. I know from experience how difficult it is to get the patient to understand just this mute kind of symptom and to make her aware of this latent, and often excessively strong, hostility without endangering the treatment. So I broke it off as soon as I recognized the girl's attitude to her father, and gave the advice that, if it was thought worth while to continue the therapeutic efforts, they should be carried out by a woman doctor. The girl had in the meanwhile promised her father that at any rate she would not communicate with the "lady", and I do not know whether my advice, the motive for which is evident, will be followed.

Only once in the course of this analysis did anything appear which I could regard as a positive transference, as a greatly weakened revival of the original passionate love for the father. Even this manifestation was not quite free from other motives, but I mention it because it brings up, in another direction, an interesting problem of analytic technique. At a certain period, not long after the treatment had begun, the girl brought a series of dreams which, distorted as is customary, and couched in the usual dream language, could nevertheless be easily translated with certainty. Their content, when interpreted, was, however, striking. They anticipated the cure of the inversion through the treatment, expressed her joy over the prospects in life then opened to her, confessed her longing for a man's love and for children, and so might be welcomed as a gratifying preparation for the desired change. The contradiction between them and the girl's utterances in waking life at the same time as them was very great. She did not conceal from me that she meant to marry, but only in order to escape from her father's tyranny and to follow her true inclinations undisturbed. As for the husband, she remarked rather contemptuously, she would easily deal with him, and besides, one could have sexual relations with a man and a woman at one and the same time, as the example of the adored lady showed. Warned through some slight impression or other, I told her one day that I did not believe these dreams, that I regarded them as false or hypocritical, and that she intended to deceive me just as she used to deceive her father. I was right: after this exposition this kind

of dream ceased. But I still believe that, besides the intention to mislead me, the dreams partly expressed the wish to win my favour; it was also an attempt to gain my interest and my good opinion — perhaps in order to disappoint me all the more thoroughly later on.

I can imagine that to indicate the existence of lying dreams of this kind, destined to please the analyst, will arouse in some readers who call themselves analysts a real storm of helpless indignation. "What", they will exclaim, "so the unconscious, the real centre of our mental life, the part of us that is so much nearer the divine than our poor consciousness, so that too can lie! Then how can we still build on the interpretations of analysis and the accuracy of our findings?" To which one must reply that the recognition of these lying dreams, a staggering surprise, signifies nothing. I know, indeed, that the craving of mankind for mysticism is ineradicable, and that it makes ceaseless efforts to win back for mysticism the sphere lost to it through the "*Traumdeutung*", but in the case under consideration surely everything is simple enough. The dream is not the unconscious itself; it is the form into which a thought from the preconscious, or even from waking conscious life, can, thanks to the favouring conditions of sleep, be recast. During sleep this thought has been reinforced by unconscious wish-excitations and thus experienced distortion through the "dream-work", which is determined by the mechanisms valid for the unconscious. With our dreamer, the intention to mislead me, just as she used to her father, certainly emanated from the preconscious, or perhaps even from consciousness; it could come to expression by entering into connection with the unconscious wish-impulse to please the father (or father-substitute), and in this way created a lying dream. The two intentions, to betray and to please the father, originated in the same complex; the former resulted from the repression of the latter, and the later one was reduced by the dream-work to the earlier one. There can therefore be no question of any devaluation of the unconscious, nor of a shaking of our confidence in the results of our analysis.

I will not miss this opportunity of expressing for once my astonishment that human beings can go through such great and momentous phases of their love-life without heeding them much, — even, indeed, without having the faintest notion of them: or else that, when they do become aware of these phases, they

deceive themselves so thoroughly in their judgement of them. This happens not only with neurotics, where we are familiar with the phenomena, but seems also to be common enough elsewhere. In the present case, for example, a girl develops a devotion for women, which her parents at first find merely vexatious and hardly take seriously. She herself knows quite well that her feelings are greatly engaged, but still she is only slightly aware of the sensations of intense love until a certain disappointment is followed by an absolutely excessive reaction, which shows everyone concerned that they have to do with a consuming passion of elemental strength. Even the girl herself had never perceived anything of the conditions necessary for the outbreak of such a mental upheaval. In other cases we come across girls or women in a state of severe depression, who on being asked for a possible cause of their condition tell us that they have, it is true, had a little feeling for a certain person, but that it was nothing deep and that they soon got over it when they had to give up hope. And yet it was this renunciation, apparently so easily borne, that became the cause of serious mental disturbance. Again, we have to do with men who have passed through casual love-affairs and then realize only from the sequelae that they had been passionately in love with someone whom they had apparently regarded lightly. One is also astonished at the unsuspected results that may follow on an artificial abortion which had been decided upon remorselessly and without scruple. One must agree that poets are right when they are fond of portraying people who love without knowing it, or are uncertain whether they do love, or think that they hate when in reality they love. It would seem that the information our consciousness receives of our love-life is especially liable to be incomplete, full of gaps, or falsified. Needless to say, in this discussion I have not omitted to allow for the part played by subsequent forgetting.

IV.

I now come back, after this digression, to the consideration of my patient's case. We have made a survey of the forces which led the girl's libido from the normal Oedipus attitude into that of homosexuality, and of the psychological paths thus traversed. Most important in this respect was the impression made by the birth

of her little brother, and we might from this be inclined to classify the case as one of late acquired inversion.

But at this point we become aware of a relation which also confronts us in many other instances of light thrown by psycho-analysis on a mental process. So long as we trace the development from its final stage backwards, the connection appears continuous, and we feel we have gained an insight which is completely satisfactory or even exhaustive. But if we proceed the reverse way, if we start from the premises inferred from the analysis and try to follow these up to the final result, then we no longer get the impression of an inevitable sequence of events which could not be otherwise determined. We notice at once that there might have been another result, and that we might have been just as able to understand and explain the latter. The synthesis is thus not so satisfactory as the analysis; in other words, from a knowledge of the premises we could not have foretold the nature of the result.

It is very easy to account for this disturbing state of affairs. Even supposing that we thoroughly know the aetiological factors that decide a given result, still we know them only qualitatively, not as to their relative strength. Some of them are so weak as to become suppressed by others, and therefore do not affect the final result. But we never know beforehand which of the determining factors will prove the weaker or the stronger. We only say at the end that those which succeeded must have been the stronger. Hence it is always possible in the direction of the analysis to recognise with certainty the causation, the prediction of which, however, in the direction of the synthesis is impossible.

We will not, therefore, maintain that every girl who experiences a disappointment of this kind in the love-longing that emanates from the Oedipus attitude of puberty necessarily on that account falls a victim to homosexuality. On the contrary, other kinds of reaction to this trauma are probably commoner. Then, however, there must have been present in the girl special factors that turned the scale, factors apart from the trauma, probably of an internal nature. Nor is there any difficulty in pointing them out.

It is well known that even in the normal person it takes a certain time before the decision as to the sex of the love-object finally achieves the mastery. Homosexual enthusiasms, as well as unduly strong friendships tinged with sensuality, are common enough in both sexes during the first years after puberty. This

was also so with our patient, but in her these tendencies undoubtedly showed themselves stronger and lasted longer than with other girls. In addition, these presages of later homosexuality had always occupied her conscious life, while the attitude arising from the Oedipus complex had remained unconscious and had appeared only in such signs as her tender fondling of the little boy. As a school-girl she was for a long time in love with a strict and unapproachable mistress, obviously a mother-substitute. For a long time before the birth of her brother and still longer before her first rebuff at the hands of her father, she had taken a specially keen interest in various young mothers. From very early years, therefore, her libido had flowed in two streams, the more superficial one of which may unhesitatingly be designated as homosexual. This latter was probably the direct and unchanged continuation of an infantile mother-fixation. Possibly the analysis revealed nothing but the process which, given the appropriate occasion, guided also the deeper heterosexual libido-stream into the manifest homosexual one.

The analysis showed, further, that the girl had suffered from childhood from a strongly-marked "masculine complex". A spirited and pugnacious girl, not at all prepared to be second to her slightly older brother, she had, after inspecting his genital organs, developed a pronounced envy of the penis, and the thoughts derived from this envy still continued to fill her mind. Really she was a feminist, she felt it to be unjust that girls should not enjoy the same freedom as boys, and rebelled against the lot of woman in general. At the time of the analysis she regarded the ideas of pregnancy and child-birth as disagreeable, partly, I surmise, on account of the bodily disfigurement connected with them. Her girlish narcissism withdrew into this repudiation¹, and ceased to express itself as pride in her good looks. Various clues indicated that she must formerly have taken great pleasure in exhibitionism and "observationism". Whoever is anxious not to curtail the claims of environment in aetiology, as opposed to those of heredity, will call attention to the fact that the girl's behaviour, as described above, was exactly what would follow from the combined effect of the two influences of maternal indifference and the comparing of her genital organs with her brother's, in a person with a strong mother-fixation. It is also possible here to trace back to the

¹ Cp. Kriemhilde's confession in the *Nibelungenlied*.

impression of an effective external influence in early life something which one would have been ready to regard as a constitutional peculiarity. A part of this acquired disposition, if it has really been acquired, has to be ascribed to the inborn constitution. So we see in practice a continual mingling and blending of what in theory we would separate into a pair of opposites — namely inherited and acquired factors.

An earlier, tentative conclusion to the analysis might have led to the view that this was a case of late-acquired homosexuality, but the further investigation of the material impels us to conclude that it is rather a case of inborn homosexuality which, as usual, became fixed and unmistakably manifest only in the period following puberty. Each of these classifications does justice to only one part of the state of affairs ascertainable by observation, but neglects the other. It would be best not to attach too much value to this way of stating the problem.

Publications on homosexuality usually do not distinguish clearly enough between the questions of the choice of object, on the one hand, and of the sexual characteristics and sexual attitude on the other, as though the answer to the former necessarily involved the answers to the latter. Experience, however, proves the contrary: a man with predominantly male characteristics and also masculine in his love-life may still be inverted in respect to his object, loving only men instead of women. A man in whose character feminine attributes evidently predominate, who may, indeed, behave in love as a woman, might be expected, from this feminine attitude, to choose a man for his love-object; but he may nevertheless be heterosexual, and show no more inversion in respect of his object than an average normal man. The same is true of women; here also psychical sexual character and object-choice do not necessarily coincide. The mystery of homosexuality is therefore by no means so simple as is commonly depicted in popular expositions: a feminine personality, which therefore has to love a man, unhappily attached to a male body; or a masculine personality, irresistibly attracted by women, unfortunately cemented to a female body. It is rather a question of three series of characteristics, namely —

Somatic sexual characteristics — Psychical sexual characteristics
 (physical hermaphroditism) —, (masculine, or feminine, attitude)
 Kind of object-choice,

which, up to a certain point, vary independently of one another, and are met with in different individuals in manifold permutations. Tendencious publications have obscured our view of this inter-relationship through their putting into the foreground, from practical motives, the third feature (the kind of object-choice), which is the only one that strikes the layman, and in addition exaggerating the closeness of the association between this and the first feature. Further, they block the way leading to a deeper insight into all that is uniformly designated as homosexuality by oppugning two fundamental facts which have been revealed by psycho-analytic investigation. The first of these is that homosexual men have experienced a specially strong fixation in regard to the mother; the second, that, in addition to their manifest heterosexuality, a very considerable measure of latent or unconscious homosexuality can be detected in all normal people. If we take these findings into account, then the supposition that nature in a freakish mood created a "third sex" undoubtedly falls to the ground.

It is not for psycho-analysis to solve the problem of homosexuality. It must rest content with disclosing the psychical mechanisms that resulted in determination of the object-choice, and with tracing the paths leading from them to the instinctive basis of the disposition. There its work ends, and it leaves the rest to biological investigation, which has recently brought to light, through Steinach's researches, such very important results concerning the influence exerted by the first factor mentioned above on the second and third. Psycho-analysis has a common basis with biology, in that it presupposes an original bisexuality of human beings (as of animals). But psycho-analysis cannot elucidate the intrinsic nature of what in conventional or in biological phraseology is termed "masculine" and "feminine": it simply takes over the two concepts and makes them the foundation of its work. When we attempt to reduce them further, we find masculinity vanishing into activity and femininity into passivity, and that does not tell us enough. In what has gone before I have tried to explain how far we may reasonably expect, or how far experience has already proved, that the elucidations yielded by analysis furnish us with the means for altering inversion. When one compares the extent to which we can influence it with the remarkable transformations that Steinach has effected in some

cases by his operations, it does not make a very imposing impression! Still it would be premature or a harmful exaggeration were we at this stage to indulge in hopes of a "therapy" of inversion that could be generally used. The cases of male homosexuality in which Steinach has been successful fulfilled the condition, which is not always present, of a very patent somatic "hermaphrodisism". Any analogous treatment of female homosexuality is at present quite obscure. If it were to consist in removing the probably hermaphroditic ovaries, and in implanting other ones of a single sex, there would be little prospect of its being applied in practice. A woman who has felt herself to be a man, and has loved in masculine fashion, will hardly let herself be forced into playing the part of a woman when she must pay for this transformation, which is not in every way advantageous, by renouncing all hope of motherhood.

A STUDY OF PRIMARY SOMATIC FACTORS IN COMPULSIVE AND OBSESSIVE NEUROSES¹

by

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Until the introduction of modern methods of mental analysis the compulsive and obsessive neurotic lived a comparatively hopeless life of invalidism. One system of physical and suggestive therapeutics after another was tried. The neurotic by force of will, which was reinforced by each new hope, succeeded in staying or occasionally unwrapping the defense formulas of the compulsive or obsessive state. But not for long did the obsessive false thinking remain repressed or sidetracked. Sooner or later the old mental crippling returned, and the patient sought new remedies or new Lourdes. But with the advent of psychoanalysis the chronic grip of this type of neurosis was for the first time unclashed more or less permanently,—though not quite completely. It may now be rather definitely stated that no compulsive neurotic is completely cured, even less so than any other form of psychoneurosis. We are told the reason is that the basic defect is really so infantile that its roots may not be fully eradicated. This explanation is not quite sufficient nor true, for before the neurosis as such put in an appearance there were in evidence certain instinctive defects upon which the neurosis was engrafted, or, better, the neurosis was a developmental unfoldment of this somatic defect. Just what these innate constitutional defects are, has been the subject of intensive inquiry. They have been made the more patent and obvious, however, since precise psychoanalysis has unearthed the infantile plan of instinctive life. These congenital or inheritable traits of personality differ considerably from each other though the neuroses in their manifestations may be fairly comparable in their fluorescence. Although one may not say that there is a constant pattern-plan of constitutional make up for this more definite entity of a neurosis, it may be defined in general terms. We are, never-

¹ Read before the American Neurological Association, June the 3rd, 1920.

theless, left less enriched in a lack of definiteness of outline than in the consideration of the more or less constant presence of make up as in the schizophrenic, the epileptic or the manic depressant. The trait fault, however, has this in common with the others, in that its final purpose, if one may speak of it in this amnestic manner, is such as to prevent the individual possessing it from dispossessing the dominance of the ego-consciousness and allowing the free and unconscious externalization of the libido or desire trend to fixate upon an object love or some field of interest. One may say, therefore, that the libido or emotional life is not flexible and easy of adaptation to social demands. But this explanation in itself does not free us from that psychoanalytic interpretation which is embraced in narcissism or self erotism. It does not go back far enough but that the fault may still be expressed in psychologic or physiologic terms. However, we do reach somatic defects of instincts when we find the individual under study is tone deaf, color blind, unappreciative of rhythm, or incapable of graceful gesture and movement. One may say with Adler that such defects of primary traits are organic inferiorities, but it were better to speak of them as trait or faculty inferiorities rather than a defect embracing a single organ. If these primary defective physiologic traits of physical makeup are demonstrated one may easily comprehend how such individuals may struggle unsuccessfully to free themselves from or diminish their egoconsciousness so that it may make the proper normal adaptations of the oncoming social development of normal adolescence. Especially is this true when the urge for the selection of a pattern-plan to secure an object-love may seem to be categorically imperative.

While it is obvious that nothing essentially new can be urged in such a thesis, the study, however, cannot help but make plainer the duty of the physician not to cease with a mere psychoanalysis of his compulsive and obsessive cases but endeavor so far as possible to encourage the patient once freed from the neurosis to make his life compromise natural and stable in order that no new or variant types of compulsions or fear neuroses may be later engrafted upon the constitutional defect.

Ordinarily the compulsion neuroses might be expected to yield less physical stigmata than that of hysteria inasmuch as the former are obviously idea disorders; but such is probably not the case because we know the compulsives are emotionally more infantile

and that the neurosis once implanted is rarely so completely cured as are the hysterias. The biologic adaptation defect is not that of a single organ inferiority in Adler's sense but rather one of a diffused function of the organism as a whole if one may use such a term. The individual fails in an all round development in early childhood. It is seen in one sphere of activity, then in another. Parenthetically it may be said that the mental defect is never to be found in the strictly intellectual functions, and as a class the compulsives are well known to be the best endowed individuals, perhaps, of all the neurotics. It is true that they may present a marked onesidedness of mental development but by and large their innate power of mentation leaves nothing wanting. If there are no marked intellectual stigmata, what may be said of the emotions? It is precisely in this field that we find the perversive anlage to have its basis, the neurosis, starting as a species of infolding or pernicious emotional repressions, soon undergoes as the child grows up a remarkable distinctive symbolization of the original fault and its conflicts. Why do these relatively trivial infantile defects make such a profound impression and later lead to a fixed compulsive mental habit? Now that so many compulsives have been analyzed we have learned a great deal about the mechanism and cure of such individuals. In examining the basic defect of so-called inborn traits, however, one is in danger of confounding effect with defect. Thus largely as the result of an early apprenticeship to a neurosis many compulsives are deprived of normal associations and adjustments to the home, school or playground group, but leaving this aside it would seem that not a few compulsives are inherently defective in aptitude to take on the genius of friendship or social life. These defects may indeed seem trivial, but are as surely to be reckoned with as better known anomalies of development which are so popularly carefully guarded against in everyday life, such as the correction of improper posture or the more serious lefthandedness. Just how much social fortitude and stress is entailed by the latter may be experienced by one's attempting for a single day to use the left instead of the right hand exclusively. Of course the routine of existence soon removes the novelty stress of such a handicap, but I venture to say a lefthanded person rarely passes a day that he does not realize more or less painfully that he lives in a right-handed world. How much greater, therefore, must be the increased

sensitiveness and desire for its protection experienced by the individual who, let us say, has a defective sense of rhythm and is not able to play music, dance, or sing. One is apt to think of this innate defect as being of account only in the social settings of later adolescence. It is quite true the shoe pinches most consciously at this period, but there are not a few instances antedating this that such a lack of personal gift distorts and cramps the personality to its lasting harm.

We shall now consider a few case illustrations of those somatic defects in compulsive and obsessive neurotics and note the role they seem to have played in the after compulsive and obsessive plan of thinking, and what character distortion they entailed to compensate for this somatic lack in physical and psychical makeup.

The first case is that of a man now thirty years old, married, an engineer by profession, who had a claustrophobia and fear of collapse when he went short distances from home. Travel was difficult and at times impossible. After several months of psychoanalysis he was practically cured; he goes about on business and only when he has occasional attacks of physical illness (severe bronchitis, tonsillitis) is he troubled with his former fears. His defense formulas were numerous changing talismans of security. Tricks of dress and carrying canes enabled him for a time to hold his fears in check. But after a time all the defenses failed, and he sought mental analysis with the above satisfactory results.

He was born a normal, healthy child. In his earliest childhood we find he was abnormally afraid of the dark; he was greatly attached to his mother for years. He was a poor "mixer" and always felt awkward and ill at ease with other boys. He was unable to make boy friends without someone else's help. He had great difficulty to take little deceptions as fun, and outbreaks of anger with boys were rather frequent when they "ragged" him with untruths. A certain literalness of mind bothered him and made him not a good sport. Soon he began to eliminate the boy group and kept only a special few for intimate friends. He was over-conscientious and worried over trifles. His matter-of-factness of mind made him a bit boring. While all these innate traits hindered his boy associations it made his attitude toward the girls quite impossible unless he was a *tête-à-tête*. He says, "As a child I find I took myself too seriously and must have been too self conscious to have made good easy friendships. I learned to bear

my social exclusions with fortitude, and compensated by evolving an intensive inner life. I think my one great fault was the lack of an easy natural responsiveness to music and rhythm, which seems more or less common in our family, especially so on my mother's side."

Remarks. We have here a rather awkward and graceless childhood in a boy who had no great genius for friendship, and who because of these physical handicaps made poor social adaptations and finally broke down in his neurosis after his first large college dance wherein his innate defects were taxed to the breaking point.

The second case is that of a woman thirty-two years old, married, with one child. She developed her compulsive thinking of a certain religious book two years ago. It was traced back to an uncertainty as to her feminine role in the marriage relation and inability to experience the climax of the sexual act. Mental analysis restored her to comparative health although the obsession of the "book" comes back under undue stress of difficult home adjustments. Her family life as a child was very poor both physically and spiritually. Her father was an habitual drinker. While she was born a normal child she had great fear of the dark. The incessant assurance and comfort of the mother showed how infantile and self conscious she remained. She always did poorly at her studies and having failed in several of them she found it impossible to get the school preferment she needed to carry out her social ambitions. While she possessed a good appreciation of rhythm and plays and sings fairly well, she has always been awkward in making things of a feminine type. It took her days to cut out and make doll garments. To prepare simple dishes she had to have a host of assistants to hand things to her. Her sense of order, system and arrangement of the household seemed to have always been defective. As a child she would be completely exhausted at the simple task of putting her room in order. As she says, "My bump of not knowing just how to do things or where to place them must have been born with me."

Remarks. Here, though our patient had a good sense of music and rhythm, she had no order or spatial sense and seemed entirely lacking in the ability to easily acquire these fundamental feminine attributes of doing household duties easily and naturally. She tried to overcompensate for this lack by actually equipping herself as a teacher of domestic science. But as her husband says,

"She can make a fine cake in an hour or so, but it takes two days to straighten out the kitchen afterwards."

The third case is that of a woman now forty-four years old, married, and without children. She has been unable to be alone at home or on the street for several years. She had an intensive and obsessive fear of all sorts of travel. She feared self destruction if left alone. She is now practically well, and has been going about her ordinary duties for two years with comfort and ease. As a child we find she had a sense of awkwardness and inability to do anything for herself. She remained silent for the first several years of her life, fearsome and terrified with undertaking anything unusual. She was quick tempered and impatient, which often in its non-expression made her have headaches and nauseas. She had a "man's voice". She rarely played with dolls, liked animals, and did boyish sports by preference. She had in earliest life an intensely sensitive nature but never knew just how to make social contacts. Although not graceful as a child she overcompensated for this lack in making a life study of singing. Her very good teacher in music says she will not succeed in this field because there is an innate lack of emotional experience of the childhood play and sport instinct.

The fourth illustration is that of a girl twenty-six years old, who has had a true compulsive homicidal idea which for the past three years has been converted into a fear lest she might do some homicidal act. Although mental analysis has been only partially successful in gaining freedom from the compulsive thinking the defects of infancy can be clearly stated. She had no free childish imagination. She was a moody child and had not a few tantrums. She was filled with contradictory ideas and seemed desirous of being thwarted. She was shy and self depreciatory. She had a matter-of-factness of mind and was easily taken in with all sorts of little childish deceptions. She was an awkward, self conscious child. She had no genius of making child friends and had to have her mother start and perfect child friendships. She took reprimands very hard even as a child of three or four and spent hours by herself in weeping. She was sensitive and easily offended, and this hindered her from mixing naturally with girls. When at twelve or fourteen she met boys in the social group she became silent and constrained and soon after began her obsessive thinking. As might be expected, she went through an elaborate episode of fear of the

dark and was never frank or open with anyone. She soon turned from the fearsomeness of things as a child to an exaggerated fondness for fairy tales, and long before she broke into her neurosis she had begun to live almost exclusively in her books. As a defense for not having a sense of rhythm, not singing or playing, she started out for an intellectual career, which ended her efforts to make a normal social life. She finally tried a course of study in the fundamentals of criminal law, which, as might be expected, broke her down completely. Spasmodically she tried short story writing since her neurosis held sway, but the attempts were pitiful efforts at elaborating the obvious faults of her own instinctive life.

Remarks. We have here a girl who from earliest childhood possessed glaring defects of the normal instincts, and, above all, had so few innate gifts of childish charm that she could not make the free and easy adaptations to the social demands of adolescence. The instinctive defects in part are traceable in the paternal relatives. Two possess such glaring similarities of makeup as to give her "great comfort" as they "understand her and know what she suffers" in her compulsion neurosis.

The fifth case is a married man of forty-two whose obsessive neurosis is one of fear of traveling on trains, trolleys, through tunnels, and on elevated railways. It appeared in an active and crippling form when he was thirty-five years old. Analysis practically relieved him of his neurosis. He goes about when and where he pleases and with the exception of a relapse after acute illness he has no attacks of his old fears. As a child he had an inordinate fear of the dark, could not go to bed alone and required a light burning all night until ten years of age. As a boy he had no mechanical ability, could not use tools and used to read and tell stories to his boy companions while they made things for him. He was an awkward, graceless youth, with no sense of rhythm, cannot sing, and "is unable to tell one tune from another". He early felt his inferiority and lack of physical endurance. He had some genius for friendships in a small way. When balked in these social efforts he became moody, reserved, and stubborn, and had active tantrums.

Remarks. We have in this case a timid, shy childhood and a nonappreciative sense of rhythm and music. He felt so handicapped through his physical inaptitudes that the niceties of balance and

social grace retarded the proper social adjustments of adolescence. He especially felt undue nervous tension in associating with mixed groups and made the development of his neurosis easy when the extra pressure of business and family worries appeared at thirty-five years of age.

The sixth case is that of married man of thirty-two who had an obsessive fear neurosis after leaving college on taking up an active business career. He had been ill for six years. After analysis he is now able to go about his work and engage in social affairs in a normal manner. He has been well several years. He was a shy, timid boy abnormally fearful of the dark until nearly puberty. He had no physical aptitude to handle tools and never engaged in the rough and tumble sports of other youths. While the parents were partly at fault for this lack, our patient himself easily succumbed to their wishes that he keep away from vigorous boyish sports. He was inapt at physical performance of dexterity and learned to dance only after a great deal of training. He has been trying to swim all his life but is unable as yet to do so. From infancy he was very stubborn and insistent upon minute details concerning his personal wants. He always kept his worries to himself and was an oversensitive, priggish child. He grew up a nonvigorous youth and easily succumbed to fatigue. He fought shy of girls and read and kept to himself the greater part of his adolescence. He seemed to have made no compensating effort to shine in any other field of human activity to make good his physical and emotional lacks. All his childish concerns of food, clothing, ceremonials of sleep, etc. have followed him up through the years and most of his time before analysis was concerned with these unsettled issues of boyhood habits.

Remarks. We have here again a general psychophysical inferiority, an innate defect of instincts of adaption, fostered and encouraged by his too-solicitous father in particular, and when such a weak individual came up against the severe and taxing demands of adult business life he broke down completely in a neurosis.

The seventh case is that of a man of twenty-nine who had a homicidal compulsive fear. After an existence of two years the neurosis compelled an analysis. He has been almost well for several years. He is extremely capable in his profession and is very productive in his life work. Only when some extremely exhausting

mental labor is experienced is he aware of the "old ideas". Rest and recreation enable him to easily restore his proper normal balance.

As a child he was inordinately fearsome of the dark, timid, shy and bashful. Though he had absolutely no ability to make things as a boy he soon compensated for this in reading imaginative literature and later in intellectual efforts, and acquired an extraordinarily good education. He had little genius for friendship with boys and spent most of his time alone. He possesses no musical sense and seems to care little for music or dancing in any form. He was never frank and open in confidences and never cared to socialize his egoistic interests until the neurosis compelled him in order to recover from it to consider that side of his self development of character.

Remarks. We have here a rather remarkable genius whose boyhood had little emotional development. He was shy, timid, and reserved, and physically incapable of boyish sports and interests. He has no sense of music or rhythm. His only childish delight was that of hunting and the use of firearms. From this type of sadistic enjoyment one can easily comprehend how his illness would take on the pattern plan of a compulsive idea of desire and fear of homicidal assault.

The eighth case is that of a girl of twenty-three who has been actively under the dominance of an obsessive neurosis for several years. She has now been well and living a normal life for two years. Her infancy was a peculiar one from the earliest months. She had no special liking for anything, and took no interest in things about her. She could do little in the way of work or play and seemed to care less. She was never demonstrative in her affections toward anyone. "It was just hello, goodbye, and how do you do toward everyone." She never tried to make friends and had no ability to make acquaintances. As she grew up (at twelve) she never mixed with boys and did not notice or seem to think about them, and never mentioned their names. She made no appeal to them when they came about. In fact her entire childhood was quite affectless until belated puberty appeared at fifteen years and with it the compulsion neurosis developed.

Remarks. We see here the innate lack of general emotional development and practically no desire to externalize her egoistic life to a love object or life interest. Yet she acquired a good

education of a certain literal sort and only broke into a severe compulsion neurosis when an independent life purpose became necessary.

It will be noted in all the abstracted cases there is a psychobiologic inferiority of instincts. This is especially shown in the defective development of the proper emotional life. Usually the type of defect was most shown in a lack of free joyous sympathetic emotion as best embraced in a musical training and setting. The lack of this faculty in some degree entails not a little stress upon developing good companionships. A physical incapacity, however, of not being able to follow the usual feminine or masculine role from infancy entails even greater handicaps upon the individual, not so much because of a possible nondevelopment of intrinsic economic worth in the business world, but because of its social disadvantages. If this were all, one might abrogate these social perquisites, but their nonacceptance entails the possible formation of a neurosis in later life. A neurosis in such a person is not necessarily mandatory, but elective as it were.

We can not too strongly urge all who have to care for and train children to strive to cultivate every trait of emotional expression to the utmost, not alone that the individual child shall escape a neurosis but that it may start its life work with as few emotional and social handicaps as possible. The mere fact that the child is innately slow in any of the instinctive social traits should not deter the parents from steadily teaching social adaptations. It is interesting to note the after life of most compulsive and obsessive neurotics. Almost invariably they seek to make good their former defective emotional education. Women take up child life by adoption, the kindergarten, Montessori or settlement work in which they can get into most intimate association with child life. Probably they are unconsciously urged to do this from several motives; one is, to act as mother to the growing child, another is to train the child in the proper way which was denied the neurotic in her own childhood, and still another is to of vicariously experience the natural evolution of the emotional life of the child in that which the neurotic had failed to experience during his own development. The men ally themselves in church movements, Boy Scouts, camps, Y. M. C. A. work, and neighbourhood boy clubs and probably do so from somewhat similar motives as those just enumerated for the women in schools and nursery work. Studies

of the regression of the libido or backthrows of it in the elderly, shown by interest in grandchildren, second marriages to youthful partners, and engagement in boyish sports to the exclusion of more adult interests, show not only a youthful vigor but also an unrequited youthful libido denied its earlier satisfactions.

As regards the basic and somatic anlage of the compulsive and obsessive neurotic we may conclude from the study of material that there is in the great majority of such an innate and somatic defect of the individual social instincts, an inborn inaptitude for socialization of the egoconsciousness, and that these psychobiologic faults are to be reckoned with in the process of all child development. The child is to be given as definite a training in emotional expression as that of the discipline of nursery ethics. Finally, all compulsive neurotics need to be encouraged in their efforts to take up forms of work and play that enable them to make good their innate faults of childhood and to reëducate themselves in this lack of early training.¹

¹ It should be noted that practically all the symptoms mentioned by Dr. Clark would be considered by other psychopathologists to belong to anxiety-hysteria. Ed.

RECENT ADVANCES IN PSYCHO-ANALYSIS¹

by

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The progress made in psycho-analytic knowledge during the past five or six years has been, in spite of the great external hindrances, very considerable, and in the attempt to present it one is met at the outset by two special difficulties: In the first place, the later researches have shewn that most of the problems in question are a good deal more complex than was perhaps at first realised, though such researches have naturally had to be based on the earlier work; it is therefore impossible to expound them without presupposing a knowledge of this earlier work, and I trust that this unavoidable fact will be borne in mind by those who find some of what follows too abstruse or abstract. The second difficulty in exposition is a more technical one, and is due to the multiplicity and variety of the contributions made during the past few years, which makes it hard to group or arrange them in any clear way. This difficulty I have dealt with mainly by the simple procedures of omission and selection. I shall not, for instance, touch on any branch of applied psycho-analysis except in the purely clinical field, and even here there are many interesting contributions with which I shall not be able to deal, among them being, to my regret, the valuable series of Pierce Clark's on the subject of epilepsy (1). In the narrower field itself thus circumscribed no general review of the literature will be attempted, this being now fortunately accessible elsewhere (2), and I shall merely aim at calling attention to a few of what I consider to be the main respects in which advance in our knowledge has been made. As may be anticipated from this definition, the work chiefly dealt with will be that of Freud himself, ever the pioneer in our science.

Technique. One striking new departure in technique has been made, the importance of which, however, cannot yet be estimated

¹ Read before the Medical Section of the British Psychological Society, Jan. 21, 1920.

because it is relatively at its beginning. It consists in what Ferenczi has called "active therapy". As is well known, our methods so far have been confined to discovering and overcoming the resistances of the patient against his knowledge of his unconscious, making use of the transferences for this purpose, and relying on the patient's desire for recovery as the main motive for carrying through the analysis. The rate at which this task was carried through was determined mainly by the varying psychical constellations of the patient, and so with few exceptions — such as, for example, the help derived from a general knowledge of symbolism — was largely independent of the analyst. Now it has long been observed that the patient's psychical constellation, on which the progress and duration of the analysis depends, fluctuates greatly according to both internal and external factors, and studies have been made of these varying mental states and the circumstances influencing them. It became clear, for instance, that the efforts made by the patient to carry through the analysis vary with his need of mental health, and thus is usually greater in proportion to his suffering. Partial recovery from the symptoms, therefore, with consequent relief of suffering, or, again, an access of happiness from a changed external situation, very often has the effect of diminishing the patient's efforts in the analysis, so that, however glad the analyst may be of such happenings on other grounds, he has good reason to fear their delaying influence on the course of the analysis. Too much comfort, happiness, or satisfaction of any sort can on occasion be detrimental to the interests of the analysis by lowering the tension of the energy at the patient's disposal for carrying out the work needed of him, and it becomes a question whether in certain cases it may not be advantageous artificially to keep this tension up to a desirable height by deliberately forbidding the patient to indulge in various outlets for his pent-up feelings. It should be remarked that this applies to the outlets which afford an unconscious relief far more than to conscious enjoyments, and, further, particular stress should be laid on veiled forms of libidinous satisfaction, as Ferenczi (3) has well pointed out, the importance of libidinous impulses as the driving forces in the neuroses being a matter well recognised by all psycho-analysts. For this reason Freud (4) has formulated the rule that "the analytic treatment should be carried out, so far as possible, in a state of abstinence". By this he naturally does not

mean abstinence from all pleasure, nor even abstinence from sexual indulgence, but only that in the situation there should always be a certain element of deprivation, one which would be removed by the success of the treatment.

In addition to the series of didactic articles he has published on the regular technique (5) Freud has pointed out respects in which "active" deviations from this may be made according to the type of case (4). Thus he suggests that with an obsessional neurotic one should proceed until the idea of the analysis itself has become involved in the obsessional structure and then play off this obsession against the illness. Again he remarks that one can never cure a severe case of hysterical phobia if one allows the patient to shield himself entirely from the danger of an anxiety attack by means of the phobia; when the analysis is not making progress the patient should be got to expose himself to such an attack, of course of a mild order, when his analytic impulses will be strengthened and suitable material will be brought out. Mention should also be made of a series of technical points raised by Ferenczi (6), the most valuable being a criticism of Freud's "golden rule" relating to the freedom of associations where he discusses the ways in which the patient may exploit and misuse this.

An extraordinary casuistic study of infantile sexuality which Freud has recently published (7) is of interest for both treatment and aetiology. In the light of the material there presented he discusses at great length the validity of the ultimate constructions made towards the end of a complete analysis. One is often compelled to infer a primordial scene (*Urszene*) in the patient's early life—in this case it was at the age of eighteen months—the later effects of which have been of decisive pathogenic importance, but the memory of which can no longer be recalled through any technical device. In some cases this primordial scene corresponds with a real occurrence, in others with a pure phantasy, and Freud raises the question whether such a phantasy, of which a typical example is the overhearing of parental coitus, must always have been based on some kind of individual experience or can be the product of inherited predisposition; he inclines towards the later view. Altogether of late he has devoted much attention to clarifying the psycho-analytic theory of the aetiology of the psycho-neuroses. Following on his essay entitled "Neurotic types of falling ill", which was published before the war (8), he

has discussed the subject fully in his recent introductory lectures on psycho-analysis (9). He sees the course of events somewhat as follows: Partly as the result of a deprivation in the outer world, the libido seeks other outlets and tends to regress to earlier stages of development, especially to the points of its "fixation" in childhood. These fixation-points are determined partly by inherited predisposition, partly by infantile experiences or phantasies; the libido finds its way back to them *via* unconscious phantasies in which they are still represented. If nothing but this regression takes place the result is a sexual perversion. If, however, as is so often the case, the form of sexual activity corresponding with the fixation-point is not in accord with the standards of the later ego-ideal, there arises a state of conflict between the two, in which the former is repressed and prevented from entering consciousness or from finding any kind of motor expression; this is the second or internal deprivation. The wish in question is then subject to the mechanisms characteristic of the unconscious, displacement, condensation, etc., and can reach expression, like the wishes of a dream, only after undergoing such distortion as renders them unrecognisable in consciousness. The relative importance of the three main factors, the deprivation, infantile experiences, and inherited predisposition, Freud conceives to be variable and mutually interchangeable, thus laying stress on a new element in his theory which he terms the "economic" one as distinguished from the "dynamic" one. The same applies to the relative strength of the forces appertaining to the self and the sexual impulses respectively, and he points out how important for the origin of the psychoneuroses is the relative development of each of these two sets of impulses, the extent to which it is parallel in both, and so on.

Characterology. The first psycho-analytic contribution to this subject was Freud's article in 1908 on the anal character. The importance of this has been increasingly recognised of late years and recently I published a review (10) of what is now known of the respects in which the anal-erotic sensations of the infant influence character traits in later life; I was able to shew that the extent and the manifoldness of this influence are far greater than anyone who has not investigated it could imagine. In an earlier work (11) I discussed the curiously close relation subsisting between hate and anal-erotism in both the normal and, more especially,

in the obsessional neurosis, and Freud (12) has expressed the view that this combination is characteristic of a certain stage in normal sexual development, which he terms the "pregenital" stage because it antedates that in which the primacy of the genital zone is established. When, as is far from rare in adult life, there is a tendency to regression in the direction of this level of development, corresponding changes are manifested in the person's character. Abraham has further shewn (13) that there exists a still earlier pregenital stage of development, which, from the prominent part played in it by the buccal zone, he calls the "oral" or "cannibalistic" one; fixations or regressions in connection with this stage also can be accompanied by typical character changes.

Freud has made a second contribution to this subject in an essay entitled "Some character types from psycho-analytic work" (14). He describes here three types. The persons of the first type are distinguished by their making special claims to be treated as "exceptions". It is true that we should all like to be treated by our environment as exceptions, as individuals to whom the strict rules of life should not apply as they have to with mere other people, and who should be granted special privileges in obtaining pleasure and in being spared the bitter demands of necessity. The people in question, however, not only desire this, but seriously maintain that they have an actual right to expect such special treatment on the part of their environment and of fate, and this characteristic is at times so highly developed as to render its possessor impervious to argument and quite unable to see either the unreasonableness or the impossibility of their demands. Freud illustrates the type by the example of Richard III, and states that in all the patients of the kind he has analysed he has been able to trace the origin of the character trait to a painful event in infantile life regarding which they knew themselves to be innocent and which they looked upon as an unjust injury; they then go through life claiming compensation for this in the form of exceptional treatment. It is probable that much of the specially privileged position claimed by women, and accorded to them, is the result of the idea that they were unjustly deprived of an important part of the body in early life, and the bitterness of so many daughters against their mothers is due in the last resort to the reproach that they were brought into the world as girls and not boys.

The second type, which Freud illustrates by analyses of Macbeth and Ibsen's *Rosmersholm*, he designates as "those who are broken by success". The subjects of this type display the peculiar reaction of breaking, usually in the form of a severe psychoneurosis, just when they attain the success for which they have long hoped and striven, thus presenting a curious paradox to the rule that a neurosis follows on some deprivation or disappointment. It is not hard, however, to solve the paradox. In the commoner cases an external deprivation leads to the internal deprivation which is the essential precursor of the neurosis, while in these rarer cases the internal deprivation alone suffices and is brought into play by the realisation of what had previously been treated by the ego as a harmless phantasy. As is well known, conscience often passes a very different judgement on the mere wish for a given action and the putting this into force in real life.

The third type Freud terms "the criminal from guilty conscience". The persons of this type are not guilty because they have committed a forbidden act, but commit the forbidden act because they feel guilty, obtaining thereby a relief of this feeling. They displace their feeling of guilt on to the relatively mild offence, and ease their conscience by undergoing penance in the form of the punishment they provoke. Naturally the original sense of guilt had an older source, probably always arising ultimately from the Oedipus complex. It is an interesting question to ask how many actual criminals belong to this class, excluding of course those who have no scruples of conscience, and one might add that Freud's contribution throws some light on the curious fascination for the forbidden which most educators have observed.

Freud has continued his series of publications entitled "Contributions to the psychology of love", and I will refer only to the one that appeared during the war, on the subject of virginity. It is primarily an investigation of the curious fact, observed in many savage tribes, that the defloration of a woman is carefully entrusted to some other man than the future husband. After giving an account of the accompanying features of the rite, and the hypotheses that have attempted to account for it, he brings it into relation with the various reactions that psycho-analysis discovers in regard to the act of defloration. On the one hand this is often followed by a very special and lasting attachment to the man who performed the act, this being particularly marked when an unduly

great resistance against sexuality had previously existed and is overcome by the first act or acts; a similar kind of "sexual dependence" may sometimes be observed with men who had previously been impotent. At the other extreme are women who never love, and may even hate, the man who deflowered them; they are often, however, quite capable of forming a deep attachment to another man, which is a psychological reason why many widows make successful second marriages. In between these extremes are two instructive types of neurotic reaction; in one of these, where the mechanism resembles that of the obsessional neurosis, both attitudes can coexist, namely love and hate; the other, by far the commoner, is the well-known hysterical anaesthesia or frigidity, where the hostility acts by neutralising and inhibiting sexual love. Freud enumerates four grounds for the hostility in question which is so likely to be aroused by the first act of intercourse, and considers that the deepest and most important is the "envy of the penis" that most girls experience to a greater or lesser extent, and which always lies behind the wish to be a boy. The hostility thus aroused may lead to a desire for revenge on the man who finally and definitely made them into a woman. There are good reasons for thinking that in primitive times this hostile reaction was more prominent than it is now, when it has been largely counterbalanced by the enhanced importance of psychical love, and it is to the desirability of avoiding this hostility that Freud ascribes the curious taboo of virginity among savage tribes, including the ceremony of having defloration performed by someone other than the husband.

Narcissism. We now come to what I consider to be the two most important advances in psycho-analysis made in recent years, those relating to narcissism and metapsychology respectively. It will be remembered that the conception of narcissism formed no part of Freud's earlier theory of sex, in which auto-erotism and object-love were contrasted with the non-sexual impulses of the personality — grouped together under the name of "ego-impulses". It was only the psycho-analytic investigation of paraphrenia (dementia praecox) that led him to interpolate in his scheme of sexual development the stage to which he gave the name of "narcissistic", borrowing this term from the perversion which Havelock Ellis had thus christened. He regards this stage as an intermediate one between the earlier auto-erotic one and the later one of object-

love, partaking as it does of the qualities of both; in it the first love-object is found, namely, the self (16). A distinction is thus made between the libidinous and the egoistic aspects of the self, and on the basis of this distinction the libido theory has been carried much farther than at first seemed possible, and has led to investigations which have thrown much light on the psychology of the ego itself; indeed, Freud sets such hopes on the results to be achieved by future researches in this direction that he anticipates they will make our present psycho-analytic knowledge seem small in comparison.

What has been learned about narcissism has been derived mainly from three sources, from the study of two sexual aberrations, homosexual inversion and the perversion called narcissism, of the mental characteristics of children and savages, and, most important of all, that of the paraphrenias; further knowledge has been gained also from the observation of hypochondria, the mental state in organic disease, and the psychology of love. These sources will now be considered in this order.

The existence of the perversion called narcissism would probably not have in itself led to any wide conception of this aspect of sexuality, though its occurrence in a pure form is of considerable interest. It was soon found that prominent features of the same tendency towards love and admiration of the self are characteristic of other conditions, notably homosexual inversion. This is, it is true, more striking in certain forms of inversion, particularly in that generally called the passive or feminine type, but the fact itself is easily observed in all forms and has often been illustrated in literature, for example, in Oscar Wilde's "Picture of Dorian Gray". In all analyses bearing on the subject it is found that narcissism and homosexuality are extraordinarily closely related, and the conclusion was finally reached that the relationship must be of a genetic order. By that is meant that love of one's own sex stands nearer to the primary auto-erotism and narcissism than does love of the opposite sex, and that the former stage has first to be traversed in the course of development before the latter, adult stage is reached. Homosexuality thus represents, in of course a very modified form, the undue persistence of an early phase in sexual development, one which normally is rapidly passed through in infantile life and again, on another plane, during the years of adolescence. In this connection I may remind you of the essential

part that repressed homosexuality has been found to play in the causation of chronic alcoholism, of drug habits, and of paranoia, but as the work on these subjects is no longer recent and may even be described as fairly well known I shall not dwell on it here.

In children and among primitive people are to be observed a number of traits which, if they were met with among educated adults, would remind one of the megalomaniac delusions of certain forms of insanity (17). These are especially the sense of self-importance, the egocentric attitude towards the world, and evidences of the curious belief in the power of thought and wishes with which we first became familiar in the obsessional neurosis in the symptom known as belief in the "omnipotence of thought". This is doubtless the key that leads to the understanding of magic, the belief in the magical power of words, and so on. Such observations confirm the conclusions arrived at elsewhere that narcissism represents a primitive stage in development.

It was, however, the study of paraphrenia that has thrown the most light on the subject. The first point was one made by Abraham, as long ago as 1908 (18), who concluded that the withdrawal of libido from the objects of the outer world was of central importance in paraphrenia (*dementia praecox*), and attributed the characteristic megalomania and egocentricity of the disease to the return of this libido to the self. Attention may be called to the use of the word "return" in this connection; it indicates the view that all libido externally directed emanates originally from self-love, is, so to speak, an outpouring from this central source, and that it can be later withdrawn from the external attachment. It is considered, further, that within rough limits there is a mutual reciprocity between the amount of libido which remains attached to the self and the amount finding external expression. In the course of a person's life libido frequently oscillates between internal and external expression according to the opportunity for external attachment and other circumstances. A certain freedom of movement of the libido in both directions is requisite for mental health, though this of course varies to some extent in different people. The characteristic of paraphrenia, on the other hand, seems to be a curious adhesiveness of the libido which makes it difficult or impossible for it to flow externally again after it has once been withdrawn to the self. Paraphrenia differs from the psychoneuroses

in that the object-libido is re-converted into ego-libido, whereas in the latter, although it is similarly withdrawn from the objects of the outer world, it remains attached to phantasies of them, as we are aware from our studies of the unconscious mental life of neurotics. When the ego can absorb this quantity of dammed up libido there results the familiar megalomania, which corresponds with the introversion of the neuroses; when it fails to do so there results hypochondriacal anxiety, which is homologous to the morbid anxiety of the neuroses. Constant efforts are made to get the libido to move once more outwards, and it is these efforts which produce most of the startling symptoms of paraphrenia, described in the text-books; it is interesting to note that these usually described symptoms are really not at all symptoms of the disease itself, but of healing processes, the spontaneous efforts towards recovery. It may be said that a given case of paraphrenia presents three groups of manifestations: (1) those of the normality that still remains; (2) those of the disease process, such as the withdrawal of love and interest from the outer world, the megalomania, regressions, and hypochondria; (3) those of recovery, including the delusions, hallucinations, and most of the striking changes in conduct, all due to anomalous attempts to effect a fresh contact with external reality. After this introduction we shall leave the topic of paraphrenia for the moment, returning to it later in connection with that of the structure of the unconscious.

Ferenczi (19) has called attention to the significance of the banal observation that the subject of organic disease, especially of a painful one, commonly withdraws his love and interest from the outer world, the former more strikingly than the latter. In terms of the libido theory one would say that he has withdrawn, more or less, his libido from its attachment to external objects and concentrated it on himself, to let it once more flow outwards when he recovers. With a chronic disease this process may lead to local regressions and the formation of hysterical symptoms—an example being a nervous cough as a sequela to whooping-cough—a condition to which Ferenczi would give the name of “patho-hysteria”; it differs from the rather closely allied “fixation-hysteria” in that the libido disturbance is secondary to the organic disease instead of being primary to it, as it is in the latter condition. These pathoneuroses are to be distinguished from hypochondria, which has in common with them the association of

bodily pain with narcissistic regression, by the fact that in this latter condition no organic changes are known to occur in the organs concerned, but Freud surmises that though this is so there may nevertheless be functional changes in these organs. He draws a comparison between such a painful and tender organ, which is somehow changed from its normal state and yet is not diseased in the ordinary sense, and the state of erection, in which an organ is swollen, congested, and the seat of manifold sensations. It has long been recognised that various parts of the body have an erotogenic capacity, that is, a capacity for having erotic sensations aroused in them and of behaving more or less like genital organs, and Freud thinks there is reason to believe that erotogenicity may be a function of still more parts of the body than we had assumed, including many internal organs. If that is so, it may prove that the meaning of hypochondria is to be found in disturbances of the local distribution of the libido, or in changes in local erotogenicity, changes in the organs which would then produce results not dissimilar from what we see in many cases of organic disease, namely narcissistic regression.

A sphere in which the importance of narcissism is clearly to be discerned is that of love. As is well known, infantile experiences and relationships commonly exert an influence on the later choice of a mate, particularly, for example, in the impulse to seek someone to whom one can look up, as a child admires and looks up to his parent; the attitude may of course go on to the further stage of desire for a partner who will protect, sustain, and support one. In many analyses, however, particularly in those of homosexuals, it has been found that the love choice proceeds quite otherwise, it being dictated not by the characteristics of the parent, but by those of the person himself; this may therefore be called the narcissistic type of choice of object. The two types are rarely pure, most people shewing the capacity to choose in either direction or in a mixture of both. There are interesting differences between the two sexes in respect to these two types of choice, though one should add that such generalisations are rough ones, subject to many modifications and exceptions. On the whole, however, it may be said that the first-mentioned type is more characteristic of the man and the second of the woman. The man more often attains the highest degree of object-love in which honour, respect, or even adoration is shewn for the woman to whom he looks

up. This "sexual over-estimation" of the object doubtless originates in the child's narcissism, which is transferred first to the parent and later to the mate. In the early stages of love so much libido flows outward towards the object that the ego is relatively depleted, and a sense of personal inferiority and unworthiness results, the extreme forms of which, the lover's doubts and moans, have often been depicted by poets. It is only when the love is answered that a state of equilibrium in the personality is restored and the ego again becomes rich. The most typical form of love among women, on the other hand, is not so much the desire to love as the desire to be loved, and they become attached to the man who best fulfils this condition; this is especially true of beautiful women. A successfully carried out narcissism exerts a peculiarly strong attraction on many men, particularly on those of the most manly type. The appeal of the child to our affection is of a similar nature. It is as though one envied those who have been able to retain that happy mental state which the realities of life have forced one to give up oneself. There are nevertheless various ways in which the woman also can attain to full object-love. The most obvious is through her child, by means of which the narcissism gets transferred on to an external object, which was originally part of herself. Another way is that she may form a masculine ideal somewhat on the lines of the masculine traits of her own childhood, which have been suppressed as the result of the changes accompanying puberty.

To sum up the influence of narcissism on the choice of a loved object: The narcissistic type may fall in love with

- (a) What one is oneself (or, indeed, actually with oneself).
- (b) What one once was.
- (c) What one would like to be, one's ideal.
- (d) What was once a part of oneself, the child.

It may be added in connection with the last-mentioned example that the narcissism of either parent may easily become transferred in excess to the child, to the great detriment of the latter. Many parents, in their characteristically narcissistic over-estimation of their child's virtues and overlooking of his defects, in their desire to spare their child all the necessary hardships of life, in their ambition that the child should fulfil their own unsatisfied ideals, once more renew in this way their own long lost narcissism.

Freud then develops the theme of the evolution of narcissism

in the individual, and the disturbances to which it is exposed in the course of growth. It rapidly gets restricted through the agency of many factors, among which that of the castration complex in boys, the envy of the penis in girls, often attains a pathogenic significance. It is probable that the ego-libido never becomes entirely transformed into object-love, but what does not become so transformed does not necessarily remain in its original state. Another important part becomes displaced in the interesting process which Freud calls the formation of an ego-ideal. This is largely built up from social and ethical ideas implanted by the parents and other educators, and the love which in infancy belonged to the real ego now gets transferred to the ideal one; the narcissistic origin of ideals explains much of their otherwise inexplicable strength and importance in life. The difference between the process of idealisation and that of sublimation seems to be somewhat as follows: In sublimation there is a deflection away from a sexual goal, which is by no means necessarily the case with idealisation, for a sexual object itself can be idealised. Sublimation is purely a matter of the object-libido, idealisation can concern either object-libido or ego-libido. Sublimation refers rather to a change in the impulse, idealisation is the view taken of a given object. The two processes are therefore not identical. For instance, idealisation usually calls for sublimation, but it does not follow that this will take place, for that depends on other factors; in neuroses it is common to find undue idealisation combined with defective power of sublimation, leading therefore to intense conflict between the ego and the libidinous impulses. Idealisation greatly favours repression, and represents the part of the ego opposed to repressed tendencies; sublimation represents one of the outlets for such tendencies.

Freud considers that there is a special faculty present in the ego the function of which is to assure the narcissistic satisfaction given by the ego-ideal, and he identifies it with the conscience. In a study of the delusion of observation he points out that here there occurs a dissociation of this faculty from the rest of the ego, when the patient hears the voice of conscience projected as an outer voice. He further identifies this watching conscience with his dream censorship, the existence of which—or rather the name for which—has been the matter of so much criticism in this country. In a similar connection he makes a

number of contributions to the subjects of self-confidence, the psychology of love, and the understanding of crowd psychology, which I have no space here to consider.

The application of the theory of narcissism to the subjects of dreams, sleep, and melancholia will be discussed presently, and I shall close this section by a few remarks on its relation to the problems of war shock. Basing myself on Freud's recent analysis of the nature of normal fear and its relation to neurotic anxiety, where he dissects it into the three components of anxious preparedness, suitable motor activities, and the state known as developed anxiety, I have sketched a theory of the fear which undoubtedly is behind most, or all, of the symptoms of war shock (20). My suggestion that this emanates from repressed ego-libido, so that war shock would rank as a narcissistic neurosis, has been independently confirmed by Abraham, Ferenczi, and Simmel (21), and has also been borne out by my experience in the two years that have elapsed since writing on the subject. This experience has also strengthened my suspicion, which I did not mention at the time, that repressed homosexuality plays a prominent, and perhaps essential, part in the aetiology of this neurosis. It is likely that the same holds good for all cases of traumatic neurosis, but our experience here is as yet too limited to make definite statements.

Metapsychology. In the last couple of years Freud has made a number of tentative beginnings towards the investigation of a new branch of science to which he gives the name "metapsychology" (22). He suggests this term to denote a psychology which will regard every mental process from three points of view: namely, the dynamic, the topographical, and the economical. Interest in these points of view do not indicate an altogether new tendency in his work, for there have been hints of them even from its first inception, though they have certainly been insufficiently appreciated by those who have concerned themselves with psychoanalysis. To take them in order: Freud has always been less interested in the mere interpretation of symptoms, dreams, slips of everyday life, and other material he has analysed, than in the *dynamics* of the mechanism producing those phenomena, thus differing from most of his readers and perhaps also of his followers. It may indeed be said that, although his interpretative work has perhaps been more sensational and has certainly attracted more

the attention of the casual reader, nevertheless, indispensable as this was, it is not really so important as his discoveries regarding the actual forces at work and their relation to one another. This dynamic conception, for example of the neuroses, represented a striking advance on the more static conceptions of Janet and Morton Prince. In speaking of Freud's *topographical* conception of the mind one refers to his endeavour to survey mental processes from the point of view of their psychical locality, to learn something about the spatial relationships of different mental functions. He holds that mental processes will possess certain characteristic attributes according to the region of the mind in which they are; the differences between consciousness, the pre-conscious, and the unconscious are the great exemplifications of this. By an *economical* point of view Freud means one in which the attempt is made to ascertain the laws covering the production, distribution, and consumption of definite quantities of physical excitation or energy according to the economic principle of the greatest advantage with the least effort.

Freud has approached this subject in a series of five essays (21), and I shall select a few of the main points from them in order. He begins with an attempt to clarify our psychological conceptions of instinct, and, starting with the physiological concept of the nervous system as a reflex apparatus the function of which is to avoid stimuli or abolish their effects, he points out the differences between stimuli of instinctive origin and those emanating from without. Because the former cannot be dealt with by any form of motor flight, as the latter can, but only by complicated ways of altering the outer world so as to bring about suitable changes in the internal source of stimulation known as satisfaction, he considers that it is the instincts, and not external stimulation, which are the true causes of progress and have led to the present complexity of the nervous system. As the mind seems to be regulated throughout by the pleasure-pain principle, he thinks that this must mirror the way in which stimuli are dealt with in general, and he correlates pleasure with a relief of excitation and pain with an increase of it. After a number of considerations on the nature and characteristics of instincts in general, and the fate they undergo in development, he illustrates his views by taking the example of the sexual instinct, the one which the nature of their material has compelled psycho-analysts to study most fully. The destiny of such

an instinct would seem to lie in one of four possible directions: reversal into its opposite; turning against the subject; repression; and sublimation. It essentially depends on the instincts being subjected to the influence of the three great polarities that govern mental life, namely, the *biological* one of activity—passivity, the *real* one of self—outer world, and the *economical* one of pleasure—pain. The inter-relationships of these three polarities, which sometimes coincide with and sometimes cross one another, are distinctly complex, and are discussed by Freud at some length. For instance, the contrast of active and passive cannot be identified with subject and object (self and outer world); the subject is passive towards the object in so far as it receives stimuli from it, active when it reacts to these, and especially active towards the outer world when stimulated by an instinct. Again, subject and object can only be identified with pleasure and pain (or indifference) respectively in the beginning of life; soon the subject is separated into a pleasurable part and a painful part which is projected into the outer world, while at the same time the outer world is divided into a pleasure-giving part which is incorporated (introjected) into the self and the opposite of this which remains distasteful or indifferent, the stage being thus attained which Freud refers to as that of the “purified pleasure-self”.

The first two processes mentioned are dependent on the narcissistic organisation of the ego, and shew traces of this in their development. The *reversal into the opposite* may occur in two quite distinct ways. There may be a change in the instinct from active to passive, such as from sadism into masochism, observationism into exhibitionism, loving into being loved, or there may take place a reversal of the content, of which the only example known is from love into hate. Freud analyses fully the genesis and relationship of love and hate, and shews that they are not simple opposites. He maintains that they arise from independent sources, that hate rather than love represents the earliest attitude towards the outer world, that hate stands throughout in the closest connection with the instinct of self-preservation, and that the apparent transformation of love into hate sometimes seen is not so much what it appears to be as a regression to a sadistic pregenital level in which the erotic relation to the object is still preserved. The *turning against the subject* is a change in the instinct which is curiously related to the one just considered. Freud illustrates it by tracing in detail

the genesis of the two pairs sadism—masochism and observationism—exhibitionism, and holds that the first mentioned of these in each pair is always the primary. He finds that, for instance with sadism, the active attitude is first manifested towards an object in the outer world, then turns against the subject (at which stage it remains in the obsessional neurosis, in the form of self-torture), and only then is changed to the passive one of masochism by getting an object to play the active part; even here, however, the person probably obtains a double pleasure, on the one hand sexual excitement at suffering pain, and on the other sadistic enjoyment through unconscious identification of himself with the active object.

In the next essay Freud discusses the third of the above-mentioned possibilities, namely, *repression*. Repression is something between flight and condemnation by judgement, its sole function being to avoid the pain that would be inflicted on the ego through the pleasurable satisfaction of certain of its instinctive impulses. Its essence consists in the keeping from consciousness knowledge of the impulse. It is not the earliest form of defence mechanism against an impulse, being preceded by the two discussed above, the reversal of an impulse and its being re-directed against the subject. The repressions of later life are only possible in regard to derivatives or other connections of the primordial repressions which take place in infancy. The representatives of an impulse in a state of repression undergo special changes and forms of growth. The state is maintained by a pressure steadily exerted from the direction of consciousness, but it is a mobile and variable one, depending on many factors. The derivative of a repressed complex, for example, finds its passage into consciousness easier the more distant is its association with the complex, the greater is the distortion it has undergone, the weaker is the energy with which it or its complex is charged, or if special technical devices are present the best known of which are those of wit. The aim of repression may be said to have failed, even though the given idea is kept back in the unconscious, when the accompanying affect leads to distress (*Unlust*) in consciousness, usually in the form of morbid anxiety. Repression would seem to be always accompanied by the formation of substitutes, though the two processes only occasionally coincide in form, for instance in the reaction-formations characteristic of the first stage of the obsessional neurosis. The

formation of symptoms is not an immediate result of repression, but is due to what Freud terms "the return of the repressed material", and of course only occurs when special conditions are fulfilled. He then illustrates his views by a comparison of the mechanisms in the different psychoneuroses. He remarks that in conversion-hysteria the repression more often succeeds in its aim of abolishing pain from consciousness than in anxiety-hysteria, referring to the familiar "*belle indifférence des hystériques*"; the success is of course not always complete, for many bodily symptoms are disagreeable, and further the formation of so many substitutes can prove of serious disadvantage in life.

The third essay Freud devotes to the nature and relationships of the *unconscious*. He begins by defending with a convincing logic the justification for accepting the idea of unconscious mental processes, but I do not think I need detain this society with the arguments used, though they should be of interest to the philosophers who still refuse to accept this idea. He then points out the confusion there exists between the conception of the unconscious as simply comprising all mental processes of which we are not aware and the more recent psycho-analytical one of a system or region of the mind having certain peculiar characteristics. In this connection the difficult question is raised of the precise difference between an unconscious idea and a conscious one, and what happens when the former is converted into the latter. Of the two possibilities, a topographical conception according to which a fresh imprint of the idea is formed when it is made conscious, so that the old imprint can still subsist in the unconscious, and a functional one according to which a change occurs in the state of the idea, he inclines for various reasons to the latter, but points out later on that the difficulty comes partly from the question having been badly put, and that the essential change is of another order, which we shall presently come across. In discussing the vexed question of whether the unconscious comprises affects as well as ideas, he concludes that the real effect of repression is to hinder the excitation of an instinct from being transformed into affective expression, and that it owes this power to the circumstance that the outlets to affectivity (the bodily accompaniments of emotion) are to a great extent under the control of the pre-conscious, though, it is true, not so completely so as are the outlets to motor activity. When the repression is unsuccessful the

affective process is able to develop, usually in the form of morbid anxiety, but in most cases only after a suitable substitutive idea in the preconscious has been discovered, to which the affect becomes attached; an outlet is in this way afforded for the affect. In repression the preconscious is invested with a counter-charge¹ (of interest, etc.), and if the repressed idea has ever been preconscious itself it is divested of its preconscious charge, which is probably used to reinforce the counter-charge, while it receives itself another charge from its unconscious associations. Almost always a substitutive idea in the preconscious comes to replace the repressed one, and the preconscious counter-charge is then localised to this. The whole process is beautifully illustrated by the growth of a phobia. The repressed impulse can manifest itself only in the form of anxiety, and this very soon gets attached to a suitable symbolic idea in the preconscious, which now can be stimulated either by an urge from the repressed impulse or by contact with the object corresponding to the idea, for instance, an animal. If the person succeeds in altogether projecting the idea outwards he is safe from an attack of anxiety so long as he can, by suitable measures, avoid the external stimulation of the idea; he can then treat an instinct like an external stimulus and deal with it by means of flight. In most cases, however, the forward urge of the unconscious impulse compels him to localise the substitutive idea still further by investing its preconscious associations with a further counter-charge, a process which can go on indefinitely; this is what is called clinically the radiation of the phobia.

Freud goes on to enumerate the characteristics of unconscious mental processes. They are incapable of mutual contradiction, contain no idea of negation, and have no relation to time or to external reality; they are regulated solely by the pleasure-pain principle, and shew the attributes of what Freud in the *Traumdeutung* called the "primary process", i. e. they undergo condensation and displacement with extraordinary freedom. Preconscious processes have exactly the opposite characteristics, a special feature being the capacity to inhibit any tendency towards discharge on the part of a significant idea. As to the relations between the two mental systems: the unconscious can be only slightly influenced from the side of consciousness; a very sharp division between the

¹ I use the word "charge", taken from the science of electricity, to translate the German *Besetzung*.

two is a mark of morbidity. When certain conditions are fulfilled, even a repressed unconscious impulse can cooperate with and reinforce a conscious one, without altering its state of repression otherwise. Preconscious derivatives of unconscious impulses have peculiar features, and are subject to a second censorship before being allowed to pass from the preconscious into consciousness, one which is non-existent for other preconscious processes.

It is from the study of paraphrenia that there is most to be learned about the differences and relationships between the unconscious and consciousness. In this disease a striking feature is the way in which the patients will utter freely what one would have expected to be unconscious and repressed, the censorship between the two mental systems having apparently been abolished, and the question arises of what is the connection between this and the other fundamental feature mentioned earlier, namely, the withdrawal of the libido from external objects on to the self. This difficult problem has been interestingly solved by Freud through a study of speech in paraphrenia, in a way that also throws light on the whole matter of the difference between conscious and unconscious ideas. He starts from two fairly familiar observations and one original one. The first is the tendency paraphrenics have to express their ideas in terms of their bodily organs, so that one might term their language an "organic" one. The second is the notable extent to which words are with them subject to the "primary process" of condensation and displacement, with which one otherwise only meets in the unconscious. The new observation was that symbolism in paraphrenia depends far more on the idea of words than on that of things, and reflection on this brought Freud to realise that the most fundamental distinction between a preconscious idea and an unconscious one is that the former is made up of an idea of the object or process together with an idea of the corresponding word, whereas the latter consists only of the idea of the object or process. From this conclusion follows an explanation of many important features of mental development, especially as regards the function of consciousness, which there is not time to expound here. It may be remarked incidentally that what repression of an unconscious idea essentially resists is its being translated into the words connected with the object. As to the paradox in paraphrenia that in spite of the withdrawal from the outer world, which one would expect to affect most the more

conscious levels of the mind, it is nevertheless the conscious attributes of thought, namely, words, that are most heavily charged with interest, Freud thinks that this feature represents a secondary healing process, an attempt to regain contact with the outer world, which takes a path that is on the whole the reverse of the normal, proceeding, that is to say, from consciousness towards the unconscious.

In the fourth essay Freud reviews the theory of *dreams* in terms of his metapsychology, and in the light of the recent conception of sleep as a state essentially consisting in a restoration of the most complete form of narcissism, the wish to return to the mother's womb. As is known, the dream is the way in which the mind deals with disturbing thoughts from which it has failed to withdraw all interest, as it has done with other thoughts. These preconscious thoughts, remains from the mental activity of the preceding day, get reinforced from the stirring of an unconscious impulse with which they have become associated either on the day before or during sleep, and build thus a wish-fulfilment phantasy, the ideas of which undergo both a temporal and a topographical regression to the primary perceptual system. The results of this regression are projected outwards as on to a stage and are accepted by consciousness as complete reality. The formation of dreams shews interesting differences from that of paraphrenic phenomena. In the latter there is no topographical regression, only a temporal one. In paraphrenia words themselves are subject to the "primary process" of condensation and displacement: in dreams this is only exceptionally the case, namely, with words heard or read on the preceding day; otherwise any dream operations on words are only preparatory to the regression to the ideas of objects, and it is these ideas that are subject to the "primary process". In paraphrenia there is no intercourse between the investments of words and those of objects, in dreams such intercourse is unusually free.

Freud then discusses the nature of hallucination and the way in which consciousness is deceived as to its reality. He finds, by comparison of dreams with various psychotic states, that this deception can occur only when a thought has undergone regression through the unconscious memory-traces of objects to the primary perceptual system, and considers that the capacity to distinguish reality from illusion is a function of this system, the fundamental

test being the ability to abolish a perception by means of appropriate motor activity. He regards this "testing of reality" as one of the distinct institutions of the ego, by the side of conscience and the censorship, and points out that in acute hallucinatory confusion (Meynert's amentia) this becomes split off from the rest of the ego. Consideration of the topography of the repression process in different conditions leads to the conclusion that in dreams all systems of the mind are divested of their charge of interest, in the psychoneuroses those of the preconscious, in paraphrenia those of the unconscious, and in Meynert's amentia those of consciousness.

In the last essay of the series Freud solves many of the riddles of *melancholia*, as he has before those of many other neurotic and psychotic affections. He starts by analysing the dynamic mechanisms operative in the state of normal grief, by means of which the desire to live is ultimately enabled to triumph over the wish to die and share the fate of the lost object, and love becomes gradually released from its former attachment and free to form new ones. Melancholia differs from this normal process both in its outcome and in certain of its manifestations. The symptoms of painful depression, abrogation of interest in the outer world, loss of capacity to love, and inhibition of effort, are common to both, but, whereas in grief it is the world that is felt to be poor and empty, in melancholia it is the self that feels poor, worthless, and pervaded with a conviction of (especially moral) inferiority. Further, the loss that has been endured is an unconscious one, not, as with grief, a conscious one. Careful observation shews that the abuse which a melancholic heaps upon himself really represents complaints directed against a person he formerly loved, and this is the reason why he is not ashamed of his supposed deficiencies and does not behave as if they were true, conducting himself rather as someone who has been unjustly wounded. What has happened is that after some disappointment or injury connected with the loved person he has withdrawn his love from this object, but instead of transferring it to a new one, as the normal person would, or introverting it on to unconscious phantasies, as the neurotic does, or, again, applying it to the ego, as the paraphrenic does, he replaces it by a narcissistic identification of the self with the former object, there being in this process doubtless a regression to the original narcissistic way in which he

fell in love. Analysis seems to shew that three conditions are necessary for this outcome: first an actual loss, as in grief, though the loss is more often due to disappointment than to death; secondly the combination of a strong narcissistic fixation on the loved object with a lack of resistance in its investment; and thirdly a marked ambivalency, as in the obsessional neurosis. The ego thus becomes split; one part, to which the conscience belongs, can criticise, abuse, and hate the other part formed by fusion with the idea of the object. It is this ability to treat the self as an object that makes suicide possible, and there is an interesting discussion of this matter. Freud incidentally contrasts the narcissistic identification present here with the common hysterical identification, in which, on the contrary, some connection with the idea of the real object is retained. The fixation-point characteristic of melancholia he places in the first pregenital stage known as the oral phase of the libido, which is intermediate between the fixation-points of paraphrenia and the obsessional neurosis; doubtless to be correlated with this is the fact that also the psychology of melancholia is intermediate between that of these two affections. He does not maintain that his conclusions are valid for all forms of melancholia, and thinks it possible that certain forms might be produced by a toxic impoverishment of the ego-libido. In conclusion he discusses the more obscure problem of mania as representing the triumph of the opposite side of the ego in the intrapsychical conflict.

At the end of this review I am even more conscious of its deficiencies than I expected at the beginning to be, and can only hope from it that it will serve to stimulate some of you to study at first hand the works with which I have dealt so inadequately. It is only fitting that I should conclude by expressing one's gratulation and indebtedness to Professor Freud that he has been able to accomplish so much in the most trying and difficult circumstances.

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THE RELATION OF THE ELDER SISTER TO THE DEVELOPMENT OF THE ELECTRA COMPLEX

(A case of simple phobia and obsession)

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There has been of late a general and progressive movement in favour of the main concepts of Freudian psychology. But bitter controversy still rages around Freud's exposition of the development of the sex instinct, and his discovery that this instinct is the main pathogenic cause of the neuroses.

This violent (and not infrequently acrimonious) opposition, which is too often substituted for scientific criticism, is difficult to understand. To place the beginnings of the sex life of the individual at puberty is crude and thoroughly unscientific; moreover, it is in direct opposition to very many well-established facts, of the truth of which no one is more convinced than the observant parent.

Further, whilst the opponents of these theories have produced no contrary evidence to demonstrate their falsity, every psychoanalyst is able to substantiate them further by the test of practical experience.

He is able to show that the sex-life of the neurotic who comes to him for treatment is not normal: and that when analysis has laid bare the pathogenic causes of the neurosis they have proved to be rooted in disturbances of the normal sex-life. Finally he can show that when the resistances have been overcome and the patient has realised consciously what has previously been unconscious, and has been able to make the necessary re-adaptation in his life, the neurosis has disappeared. Moreover, it is not a matter for great wonder that sex, which, along with nutrition and self-preservation, makes up the great fundamental triad of instincts upon which every phase of life is built, daily subjected to terrific repression on every hand, *should* play such an important part when the repression breaks down and the resistance barriers are temporarily destroyed.

It is unfortunately still necessary to draw attention to two fundamental facts which critics are apt to overlook. One is the distinction that cannot be too strongly emphasised between the Unconscious and the Conscious. The second is the equally important point that in a conflict between the libido and sex repression *it is the resulting mental conflict* that is the essential causative factor, and not the sexual factor as such.

In a previous contribution to the *British Journal of Psychology*¹ I had myself some criticisms to offer on these points. Wider experience has led me to reject my previous views, and has compelled me to accept without reservation Freud's theories as to the causal significance of the sexual factor.

1. DESCRIPTION OF CASE.

The following notes are a summary of a case of simple phobia and obsession. They are of interest as showing (a) The complicated inter-relations that exist in the mental life of children of a large family. (b) The possible effects of such family life on the future development of the individual. (c) That "normal" and "abnormal" patients suffer from the same causes—the difference being quantitative and not qualitative. (d) The efficacy of psychoanalysis in relieving the often serious mental "worries" of the normal person and preventing the possible development of a serious neurosis.

The patient "A" was one of three sisters. She was married, highly intelligent and well-educated. She was thirty years of age at the time of treatment. Her father died when she was seventeen. Shortly after his death she began to suffer from an intense fear of the dark. "I feel as though something was going to appear out of the darkness and grab me."

She also began to have an obsession that she had left the wardrobe door open. This compulsive thought was liable to come at any moment. Not infrequently she would have to leave whatever she was doing, and return home to satisfy herself that the door was really closed.

The phobia and the obsession led to periods of depression.

¹ Vol. VII. Part 3, Oct. 1914. "An Inquiry into some Questions connected with Imagery in Dreams."

She knew they were irrational, and tried to dispel them, but they still persisted.

About 7 years ago the worry caused by this obsession became so intense as to cause a severe breakdown. The patient was subjected to ordinary medical treatment, and later, in a nursing home, to the Weir-Mitchell treatment. Her physical health was rapidly restored, but the phobia and the obsession persisted.

On her discharge from this treatment the case came to my notice and psycho-analysis was begun.

After two months, for various reasons, the analysis had to be discontinued. The phobia, however, had become less intense. Among other things the patient had recalled that when a small child¹ she had been proceeding upstairs after her bath when her sister, "B", who had been hiding in a dark corner suddenly reached out and caught her by the ankle. She was naturally terrified, and she now attributed the phobia to this cause².

In the spring of last year the patient, by a curious coincidence, came within the scope of a word-association experiment conducted by the author in the Laboratory of Applied Psychology of the Pelman Institute, and, she herself having now some psycho-analytic knowledge, was greatly interested in the results which promptly disclosed again the phobia and obsession from which she suffered. She suggested that the analysis should be resumed and this was accordingly done.

At the end of two months' treatment recovery ensued.

2. HISTORY OF THE PATIENT :

The patient (to whom we will afterwards refer as "A") was the youngest of three sisters. (These sisters will be referred to as "B" and "C", "C" being the eldest.) She was educated at the usual girls' secondary school along with her sisters, and later was the only member of the family to proceed to the University. The family was brought up in the usual atmosphere of strict

¹ There is a curious falsification of memory here which will be explained later.

² It was of course *not* the real cause, but the analysis was broken off shortly afterwards.

secrecy and entire ignorance so far as matters of sex were concerned.

As a child "A" was somewhat delicate, suffering from anaemia, but as she grew up her health became normal. Up to the age of seventeen she was considered an exceptionally clever scholar. When she entered the University she was (except for the phobia and obsession) a normal healthy girl, but did not shew any particular brilliance. After her marriage her former intellectual brilliance returned.

At the age of 17 she lost her father; the family was gradually scattered, "B" and "C" taking up various professions in different towns. From the date of the father's death (the patient in preliminary accounts considerably antedated it) up to the time of the analysis, the fear of the dark and the wardrobe obsession were continually present.

Shortly after leaving the University she became engaged to "E"; they were married in due course, and the marriage continued to be a happy one until the spring of this year, when "A" felt a growing resentment against "E" which threatened serious disturbances. Up to the time of "A's" engagement to "E" there had been a close attachment between "A" and "C" (the eldest sister). But at this point a complete separation took place, "C" disliking "E" intensely, for no apparent reason. "A" objected to this apparently baseless prejudice on the part of "C", with the result stated. "A", however, felt no particular resentment against "C".

During the war the separation between "A" and "C" continued. They both openly took opposite sides, and "A" declared that the separation was entirely due to their divergent views on this topic. At the end of the war "A" and her husband came to live in the same town as "C". "C" again entered into amicable relations with "A", but with continuing hostility to "E". Contrary to before, this aroused in "A's" mind a tremendous resentment against her sister, part of which was now transferred to her husband.

At the same time "A" was scheming to bring about a meeting between "C" and "E" (the dislike had always been mutual) and a reconciliation between them. She finally got a friend to arrange a lunch to which "C" and "E" should be invited, each in ignorance of the other's invitation, in the hope that the mutual antipathy would end and harmony within the family circle be restored.

3. THE MATERIAL PRODUCED BY ANALYSIS

(Much of the material here recorded had been completely forgotten by "A" during the intervening years, and it was not, of course, brought out by the analysis in the sequence and chronological order in which it is recorded here.)

During early childhood "A" was always petted by her father as being the youngest of the family. "C", the eldest sister, was always treated by her father as an equal. "A" always felt that *she* ought to have been treated as a mental equal instead of "C", as she was always much the cleverer child of the two. She was considered to be one of the most brilliant children in the school. Nevertheless "A" felt no resentment against "C" on this point; on the contrary she was intensely fond of her eldest sister. The mother in fact receded into the mental background until the only figure that loomed there was "C". "A" felt that "C" was the father's favourite, and that therefore equal affection was due to "C" from her.

When "A" was twelve years old her mother was seriously ill. "A" and "B" went away to the seaside with their father, leaving "C" at home with the mother. During the whole of this visit "A" was intensely miserable. Later, when "C" was confirmed, "A" began to feel at times an intense hatred for "C", whilst at the same time her affection for her was greatly exaggerated¹. The conscious motive was the fact that the three girls used to be turned out into the study to do their lessons. "C", however, persuaded her father to allow her to remain with him, and do her lessons in his company. "B" continually upbraided "C" for what they considered was an act of treachery; but in these quarrels "A" never took part².

When "A" was 16 her father was ill, with slight paralysis. He was never in danger, and "A" felt no emotion whatever. A year later her father died, after an illness lasting a fortnight. For the first week he was in grave danger, but there were strong hopes of his recovery. All through this week "A" could not sleep at all.

¹ It is, of course, one of the most amazing phenomena of physis life that love and hatred, both directed towards the same object, can co-exist and can both be operative at the same time. This is effected by the eventual repression of one into the unconscious—in this case the hatred.

² Because the conflict of love and hatred partially inhibited volition.

On the Saturday the Doctor called the family together and announced that there was absolutely no hope. *That night "A" slept soundly and continued to do so until her father's death.* All through the fortnight she had dim feelings that she would be rather sorry if her father recovered, as she did not wish to return to school and have to forego the peculiar pride of announcing that her absence had been due to her father's death.

At the end of his illness her father insisted on having by his bedside a wardrobe containing a large mirror. He used to say that through this mirror he could see "all those of his friends who had previously passed over", and would hold long conversations with them. Her father died and "A" was physically prostrated. Three days after the father's death (he was lying alone still unburied, on the second storey, everyone else having moved up to the top storey) "A" had had a bath (the bathroom was on the second storey). She was the last to go to bed, and the last to turn out the lights. Running quickly in the darkness past the room where the body lay, she turned up the stairs leading to the top storey. As she did so a figure in white came out of the room and placed a cold hand on her ankle. She gave a wild shriek and fainted. She remained in a state of coma all that night and the next day, and it was not until after the funeral that she discovered the culprit had been her sister "B".

A month after her return to school the Headmistress got up a party to see "Lohengrin". "A" was asked if she would go. One of the girls who had accepted had also returned to school after losing her father. "A" passionately desired to go, but, after a conflict that amazed and puzzled her, she suddenly stood up and announced that she would not go because her father was dead.

"A" now became more passionately fond of her eldest sister "C" than ever, and for the next two years was devoted to her.

There remains only one curious point to be recorded. During her childhood "A" was passionately fond of cats. This persisted up to the time of her engagement to "E", when a violent transfer of affection took place, and she became equally attached to dogs. On coming to reside in the same town as "C", and re-entering into amicable relations with her, the childish love for cats was suddenly revived in all its force.

4. INTERPRETATION OF ANALYTIC MATERIAL.

During the last sitting when certain of the preceding data were being obtained under stress of violent emotion, the patient suddenly collapsed in a severe hysterical attack. I made a sudden movement, and she immediately shot across the room with every appearance of the liveliest terror, assuming an attitude of defence. *She thought that I was her father, i. e. that her fear had at last been realised.* Gradually she recognised who I was, and with this recognition the hysterical attack came to an end. The analysis then went swiftly, and without further resistance, to its conclusion.

It should be noted that the interpretation of the analytic material that follows is the *patient's* interpretation. My part was confined to taking part in an occasional discussion as to psychic mechanisms, not fully understood in previous sittings.

Brought up in an atmosphere of secrecy and ignorance with regard to sex matters, "A" nevertheless busied herself in the usual way by forming, one after another, the varied and fantastic infantile sex theories. She had thus the very vaguest notions as to the implications of married life, and, indeed, never clearly recognised that anything was implied beyond joint residence under one roof.¹

Seeing that "C" was clearly the father's favourite daughter, she came to the conclusion that "C" was endeavouring to take her mother's place with her father, and eventually concluded that this was successfully accomplished, i. e. that the mother was supplanted and that "C" had become her father's "wife"—*a position that "A" desired to occupy herself.* In the normal development of the Electra complex the resulting resentment and jealousy would have been directed against the mother. Here, however, it was directed against "C", the eldest sister, and produced very varied results. When the mother was seriously ill and "C" was left at home to nurse her, the pleasure "A" might have been expected to take in the society of her father, now removed from the influence of "C", was lacking. Instead, she was tormented by the fear that "C" had schemed to be left behind in order to make away with her mother and thus remove any obstacle to her being her father's "wife".

¹ "A" was so entirely ignorant of the facts of sex, that until she became engaged to "E", who gave her the information, she had not even an inkling of the truth.

At the period when intense hatred against, coexistent with an exaggerated love for, "C" began to manifest itself, the real restraining motive that kept "A" from joining in the attacks on "C" was the fear lest, by taking sides against "C", she should hurt her father. There gradually began to develop in "A's" (unconscious) mind the idea that she could best mortally wound "C" by removing the father, *i. e.* the idea (unconscious wish) of taking "C's" place (and hence the mother's place) with her father had been superseded by the idea of revenge on "C". During the father's first illness therefore, *when he was never in any danger*, "A" felt no emotion whatever. There was no possibility of this (unconscious) wish being fulfilled.

But during the second illness, a much more serious affair than the first illness, the wish appeared to be on the point of fulfillment. Hence during the first week, while there was a chance of the father recovering "*A*" *never slept*: the unconscious anxiety, lest after all the revenge should not mature, was too great. Then came the announcement that there was no hope of a recovery, and "*A*" *slept soundly*: the anxiety was over, and the wish was to receive fulfillment.

It was now clear that the *conscious* objection to returning to school should her father recover was by no means the real objection. It was merely a disguised expression of the hope that he would not recover.

Why, on her return to school, did "A" refuse to attend the opera "because her father was dead"? Simply because she seized the first opportunity to announce to the world that her wish was fulfilled and her revenge on "C" accomplished.

As a further blow to "C", "A" later fell in love with "E", a man who was the direct opposite of her father in almost every particular, physically and mentally, whilst at the same time he resembled "C" to a physical degree amazing in two people belonging to different families. The love and hatred felt by "A" towards "C" thus found a satisfactory compromise.

It has already been mentioned that up to the time of her marriage "A" forced her mother completely into the mental background. Immediately after her marriage to "E", her mother was placed in the very foreground. The reason for this is clear. "A" was getting married, and she now possessed full knowledge of sex relationships. Consequently the relationship of husband and

wife were undergoing a considerable change in her mind. Hence, having married (through unconscious "pique") a man who was the direct opposite of the male object of adoration (*i. e.* the father) she resolutely put away the female object of adoration and the incestuous object of her father's adoration (*i. e.* the eldest sister "C").

This, as a reaction against the disgust felt at the father's supposed guilt in replacing the mother by his eldest daughter "C". She then brought within the circle of her own adoration the person of her mother who should have stood first with the father, but whom the child had supposed to have been pushed into the background and replaced by "C", and who had in consequence been pushed into "A's" mental background throughout the whole period. "A" had of course wished later that the mother *might* be pushed into the background, in order that "C" might become the mother and so in turn be similarly neglected in favour of "A", who would then take the favourite place now occupied by "C".

The sudden transference of affection from cats to dogs at the time of "A's" engagement to "E" was due to the resolute repression of everything connected with the infantile fantasy. On coming to the same town as "C", and meeting her again, the whole complex was vividly revived. Hence there occurred a second transference of affection from dogs back again to cats.

The desire to effect a meeting and reconciliation between "C" and "E" was by no means so simple nor so single-motived as the conscious expression of it would lead one to think. For underneath the *conscious* wish were the following unconscious wishes:

- (a) That "C" and "E" should like each other and that "A" should, so to say, be able to transpose persons: and, by pushing "C" off on to "E" (a further revenge motive, since "E" is the opposite of the father), be able to live again mentally in the ideal situation pictured by the child years ago, *i. e.* as the favourite child with the father.
- (b) That "E" shall dislike "C" more than ever, so that "A" may assure herself that "C" shall never occupy with her husband the place she wishes for herself, the place she wished for herself with her father, but which "C" actually occupied.
- (c) That she might have a child which should be a girl, and which "C" could see took the place with "E" that "A" had never occupied with her father (identification of "A" with her daughter and further revenge motive).

We can now plainly see the origin of the phobia and the obsession. They both spring from the same cause, *i. e.* an unconscious infliction of self-punishment for the wish of her father's death, *i. e.* a reproach returning from repression in a disguised form. In the one case she feared that out of the darkness her father would appear and seize her (a form of phobia conditioned by the childish escapade of her sister, an incident the significance of which the unconscious had disguised by antedating its occurrence); on the other hand she feared that out of the open wardrobe would come "spirits", including her father's spirit (a reversal of the death-bed episode when the father talked *into* the wardrobe): both symbolising the unconscious (repressed) wish to be revenged on "C" by causing the father's death.

The phobia and the obsession disappeared with the completion of the analysis and have not returned.

One is tempted to complete this case with one or two surmises respecting "C".¹

1. "C's" dislike for "E" was due to:—

- (a) the fact that he resembled the father in no way,
- (b) the fact that "E" never liked "C", and hence the adoration always hers was no longer there.

2. Although several times engaged she was never married. This may be due to the infantile fixation on the father.

There are two important deductions that may be drawn from the study of such a case as this. Firstly the "normal" mind is a scientific abstraction, and the idea, so long prevalent in the laboratory, that the abnormal in mental life can only be understood from a study of the normal, a sterile and fallacious doctrine.

Indeed, psycho-analysis by constructing its method upon pathological data has followed the path of experience in the other biological sciences.

The second is contained in a remark of Jung's:

"One must get rid of the idea that the educated and intelligent persons are able to see and admit their own complexes. Every human mind contains much that is unacknowledged and hence unconscious as such: and no one can boast that he stands completely above his complexes. Those who persist in maintaining that they can are not aware of the spectacles upon their noses."

¹ These of course *are* surmises—nothing more. Nevertheless they appear not improbable.

A NOTE ON WILLIAM BLAKE'S LYRICS

by

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Much of Blake's poetry labours under an obscureness that deprives it of any lasting human interest. The literary world, it is true, greeted his disinternment with unmistakable enthusiasm, but this, to a great extent, was due to the originality and unconventional nature of his illustrative etchings, whilst the very obscurity of his poetical work will have stirred the interest and whetted the curiosity of many. But though many attempts have been made to illuminate these obscurities, the interest once felt in Blake as a poet has died a natural death.

His early and strictly lyrical work, however, gained and has maintained a well deserved popularity among lovers of poetry. This (his "Poetical Sketches", "The Songs of Innocence and Experience", and "Ideas of Good and Evil") is as remarkable for its human interest and simplicity as the rest of his poetry — the "Prophetic Books", for example — is remarkable for its obscure mysticism and, general diffuseness. Yet, among the many gems of the former there are a few which, though they sometimes charm the ear, rarely convey anything to the understanding.

Two of these, however, ought to interest students of Psycho-Analysis for the Cameo-clearness with which they reflect certain typical fancies and which, though of an incestuous kind, show no traces of "secondary-manipulation".

Here it may be of interest to mention that in both his life and work Blake betrayed unmistakable evidence of having suffered from some form of insanity, at least in his later years.

The first of the lyrics in question, "The Garden of Love", for any but the psycho-analytically informed can have but little meaning. It belongs to the series, "Songs of Experience", and runs as follows:

I went to the Garden of Love,
And saw what I never had seen:
A chapel was built in the midst,
Where I used to play on the green.

And the gates of this chapel were shut,
And "Thou shalt not" writ over the door;
So I turned to the Garden of Love
That so many sweet flowers bore;

And I saw it was filled with graves,
And tomb-stones where flowers should be:
And priests in black gowns were walking their rounds,
And binding with briars my joys and desires.

The last line of the first quatrain, "Where I used to play on the green" as a reminiscence of his childhood¹ and as a symbol of his mother's lap, gives us the clue to the nature of the "Chapel" which here, of course, symbolizes the matrix. This is to some extent endorsed by the fact that Blake's mother was an Irishwoman and had probably been brought up in the Catholic faith.

The second stanza develops the incest-prohibition contained in the inscription "Thou shalt not", and shows that this forces him to look for a mother-substitute. For I take it that the "many sweet flowers" refer to object-choice, whilst the last verse clearly illustrates the unsuccessful struggle to transfer his incest-tinted libido, from his mother on to one of the "many sweet flowers" in the "Garden of Love".

At the same time, however, this last verse also expresses the realization of this incestuous desire of his infancy. For the "graves" and the "tombstones" can here stand for but one thing, the consummation of his desire, and symbolize, by virtue of their forms and relation the female and male sex-organs respectively. The consummation again, is emphasized by the black gowns of the priests which symbolize death². For through death he returns whence he came to his mother's matrix. Whilst through the priests

¹ What this meant for him is obvious from: *The Daughters of Albion*, where he puts into the mouth of Oothoon: Infancy, fearless, lustful, happy, nestling for delight in laps of pleasure.

² See: Stekel, *Die Sprache der Träume*.

and the briers he identifies himself with Christ who was crowned with thorns and crucified by the priests that here stand for Blake's father, whose existence meant the Crucifixion of his son's "joys and desires". The identity between the priests and Blake's father becomes closer if we remember that priests are ministers of the Church (Chapel) and minister to the spiritual wants of their flock, whilst a father holds a similar position in relation to the mundane desires of his wife and children.

The second lyric belongs to the series, "Ideas of Good and Evil" and is entitled "The Defiled Sanctuary". Though beautiful in itself, its images fail to convey, except to those acquainted with psycho-analysis, any idea bearing on human experience; it runs

I saw a chapel all of gold
That none did dare to enter in,
And many weeping stood without,
Weeping, mourning, worshipping.

I saw a serpent rise between
The white pillars of the door,
And he forc'd and forc'd and forc'd;
Down the golden hinges tore,

And along the pavement sweet,
Set with pearls and rubies bright,
All his shining length he drew,
Till upon the altar white

Vomiting his poison out
On the bread and on the wine,
So I turned into a sty,
And laid me down among the swine.

The first verse of this is but a variation on the whole of the previous lyric.

It is interesting to note that whereas the "Chapel" is described as being "All of gold" in the first quatrain, in the second, the "pillars of the door" have become white!. Striking too, and significant, is the strange application of the adjective "sweet" to a pavement (=body).

The key to the character of this lyric is contained in its two last lines:

"So I turned into a sty
And laid me down among the swine."

The association here was probably the "prodigal son" who also lay with swine when sharing their husks. This assumption is supported by Blake's childhood. For his eldest brother, John, in the words of Yeats, "was the best beloved of father and mother" and "grew up to be the black-sheep of the family!" It is therefore highly probable that William had often wished himself in his brother's place, to enjoy his mother's affection the more. A prodigal, again, is one who wastes his heritage; and swine waste and spill their food or husks. Between the two there is thus a certain symbolical identity. And in the above context, Blake will in all probability have associated the spilling of food or husks with the spilling of seed.¹ For husks being the covering or shells of seeds or, in other words, *Empty Seeds*, they would, other psychic factors being favourable, be naturally employed by the autistic mind as a symbol for the onanistic act. And it is this that Blake must surely have meant by his having laid him "down among the swine".

This sketchy analysis, though it may seem somewhat arbitrary, is fully endorsed by the rest of the poem. This can obviously have been inspired by one thing only: the reminiscence of his parents' cohabitation² which influenced him to react in no unusual manner³, a reminiscence of which the whole poem is a clear and beautiful dramatization.

The study of Blake's pictorial and poetical work in relation to his insanity ought amply to repay one for the labour involved. A rich field awaits the competent prospector.

¹ In a dream of the writer's, semen was once symbolized by "migraine" = my grain = seed = semen.

² The serpent forcing its way through the forbidden door.

³ See; Ernest Jones, "Einige Fälle von Zwangsneurose", *Jahrbuch der Psychoanalyse* 1912.

THREE NOTES

by

JOAN RIVIERE.

A BURGLAR DREAM

Patient was a girl of 28, suffering from severe hysteria (with a suspicion of melancholia). She was often sleepless and had anxiety attacks at night. The dream occurred after a year of analysis, during which she had many burglar-dreams, of which she had learnt the symbolic meaning. Patient slept at the time in a room alone on the first floor with a sash window. DREAM: *I was in my room in bed at night and could not sleep. I thought I heard burglars in the garden outside. I became frightened and got up to look out of the window, which was a French window and open. That's all I remember, but there were two girls asleep in the room, or at any rate, two people; one of them was a girl I know.*

1. "A girl I know" was a girl who worked in the same business as herself. On the preceding day this girl had been talking to the patient of her approaching marriage, and had mentioned that she was going to wear as a bride her mother's wedding dress and veil.

2. Patient could not remember ever sleeping in a room with two people, but, when pressed, she said that as child of 8, she had slept for a few months in the bedroom of her father and stepmother. Although she had had a year of analysis I had never heard this fact before. The father's second marriage took place when she, an only child, was about 7, and when she was 8 she came to live with them from her grandmother's.

I think the "French window" which was open may be a symbolic reference to the fact that before coming to live with her parents, when she was about 6, she was sexually assaulted by a young man, and had always doubted since whether she were virgo

intacta. The question of the hymen and virginity was exceedingly important in her neurosis.

The "mother's dress and veil" may be over-determined and also refer to this¹. Self-depreciation was, of course, a main symptom, and clothes were associated with much feeling and conflict altogether.

The dream, with its two associations, is remarkable for the simplicity of its representation of the Oedipus-wish, to take the mother's (and stepmother's) place as the father's bride.

Her previous sexual experience must have added stimulus to the revival of this wish while sleeping in the parent's bedroom.

"HIDE—AND—SEEK"

Patient was recalling how he and his brothers used to play "hide—and—seek" on winter evenings, with their father, all over the house, which was a large country mansion with many stairs, passages and attics. The father was an active powerful man, much admired and envied by the patient, a delicate feeble boy. Patient recalled that he had always had a belief, which he thought was shared by his brothers, that the father had an unfair advantage over them, partly on account of his agility and strength, but chiefly on account of his supposed use of a secret staircase, which the boys were not allowed into and had never seen. This was supposed to lead into an attic on an upper floor and accounted for the father's sudden appearances and rapid movements about the house.

I pointed out to the patient the symbolism of the *house*, of which the father had such secret and familiar knowledge and use, and he then further recalled to his own amazement, that according to the childish fantasy, these stairs were supposed to lead out of his mother's bedroom, either from inside a cupboard or from some concealed opening. "None of us ever knew where it went up from."

Curiosity and exhibitionism were very marked in the patient leading to a love for travel and adventure, acting, conjuring, and hypnotism, and to fantasies of himself as wizard and magician. (The father's magical performances.)

¹ On the symbolic relation of "veil" to "virginity" see Storfer: *Marias Jungfräuliche Mutterschaft*, 1914, S. 49.

LAPSUS CALAMI: TOOTH-PULLING AND CASTRATION

From an Autobiography, written as a novel by a girl of 25 with a snake-phobia, before analysis.

Extract: "I'll scratch and bite them all," she remarked another time when Mrs. Baines tactlessly started on the same unpleasant subject. "Then I hope your father would have every one of your teeth pulled out" said her companion sternly. Pan turned absolutely sick with horror. "Of course he wouldn't" she said. "Johnnie's father" continued Mrs. Baines, "said that if ever he did such a wicked thing as to bite anyone, he'd take him to the dentist and have every one of his teeth pulled out." "It isn't wicked to bite." "In God's sight it is", replied the other, and there the conversation ended, but Pan could not get the idea out of her head. Of course Johnnie's father could not really have meant what he said, she reasoned. The Society for the Prevention of Cruelty to Children would have him up if he attempted it, and no respectable dentist would perform such an outrage. But that anyone should threaten to do such a revolting thing was positively disgusting. Imagine some one deliberately cutting away part of another person's body and causing them fearful pain, and handicapping them for life, and a parent his own child too. Never again did she threaten to bite anyone in Mrs. Baines' hearing for fear that the sickening subject should arise again, and when on one occasion she forgot and added "I'd bite" after "I'd scratch" her heart stood still with dread lest Mrs. Baines should once more express her sentiments on the question, and she quickly changed the subject so that the latter had no time to do so.

THE SYMBOLISM OF BEING RUN OVER

by

ERNEST JONES

It has several times been pointed out in the psycho-analytical literature that the idea of being knocked down and run over by a carriage, train, omnibus, car, etc., often becomes associated in the unconscious with the idea of a sadistic assault and may on occasion, in dreams, symptoms, and so on, function as a symbol of the latter. I recently came across the following unambiguous example of this:

A stoutly-built patient, with marked sadistic traits, told me during the analysis that on the previous night his weight had incommoded his wife during sexual intercourse, so that she became rather short of breath and remarked "you will squash me as flat as a pancake". That night he dreamed that he was driving a motor-car, when someone called out to the effect that his wife was injured. He hastily stopped the car and looked back to see if he had run over her. In the middle of the road behind was — — a pancake!

There can be little doubt that the experience of the night before had stirred his sadistic impulses, which come to expression in the dream, for it is clear from the context that the running over of his wife represents a violent sexual assault. Of further interest is the symbolism pancake — woman. It is known that the idea of a woman can be symbolised by various flat objects that can be pressed or lain on, e. g. bed, table, altar, different kinds of soft material, and so on.

AMBIVALENCE IN A SLIP OF THE TONGUE

by

C. P. OBERNDORF (New York)

In discussing the ambivalence of emotions in his work on "Totem and Taboo", Freud has pointed out that the word Taboo had a double meaning, namely, holy and unclean. An interesting example of a slip of the tongue revealing this ambivalence of a subject so generally "tabooed" in modern life, namely, sexual intercourse, is the following:

During the course of an analysis I was discussing with the patient, aged 36, his juvenile attitude toward intercourse, when he remarked that he did not wish to indulge, because "intercourse is sacred" and thereupon he immediately corrected himself saying, "No, I mean intercourse is secret". In the investigation which followed it developed that the patient had associated with the idea of intercourse both the qualities of holiness (sacred), (holy bond of matrimony), and secret (something to be hidden, something not nice, something unclean). The slip of the tongue not only revealed the suppressed meaning but indicated the conscious association, the combination of which formed the classical primal attributes of Taboo.

REVIEWS OF RECENT EXPOSITORY BOOKS ON PSYCHO-ANALYSIS

- (1) *Psycho-Analysis and its Place in Life*. By M. K. Bradby. (London. Frowde, Hodder and Stoughton.)
- (2) *Man's Unconscious Conflict*. By Wilfrid Lay, Ph. D. (New York. Dodd, Mead & Co.; London. Macmillan & Co.)
- (3) *The Child's Unconscious Mind*. By Wilfrid Lay, Ph. D. (New York. Dodd, Mead & Co.; London. Macmillan & Co.)
- (4) *Psycho-Analysis: A Brief Account of the Freudian Theory*. By Barbara Low, B. A. (London. George Allen and Unwin, Ltd.)
- (5) *Mechanisms of Character Formation*. By William A. White, M. D. (New York. The Macmillan Co.)

These five books by four different authors have the common object of presenting the leading facts of Psycho-Analysis to readers who have no previous acquaintance with the subject, but the manner of presentation adopted by the four authors differs very widely.

Miss Bradby, who is a lecturer in Mental Science, seems to have in view the general adult who is also a student and casts a wide net to capture the attention of the casual reader. She makes free use of her own obviously broad range of reading and shows much acuteness in pressing it into service for the purpose of her book. With all her enthusiasm, however, in presenting the subject, Miss Bradby's book is somewhat open to the imputation of being an "Apologia" and the author is inclined to protest overmuch that Psycho-Analysis is not what a superficial observer might suppose. Starting, too, from the philosophical standpoint Miss Bradby tends to favour the theory of Jung and certainly fails to point out the essential differences between his theory and that of Freud; a beginner will inevitably read the book without realising that such differences exist. We incline to think that this is because she herself has not fully grasped these differences, as she discards moral ideas from the unconscious with apparent difficulty, and fails notably of consistency in this respect. Thus, while on page XI (Introduction) she says "but they have not yet devoted equal attention to his higher interests which are also to be found in the unconscious mind — interests which man does not share with the animals — to the longing after knowledge and beauty and power for their own sakes and the desire for moral goodness apart from any particular system of morality", on page 205 is found "The student of the unconscious mind knows well that he has within himself instincts and impulses of an animal nature which in themselves are neither good nor bad, but which come into conflict with his higher, more distinctively human, interests and desires."

We cannot point out strongly enough to Miss Bradby that to the unconscious mind, no adjective derived from the root "mos, moris" is applicable,

unless it be the adjective "non-moral", and that Psycho-Analysis has no connection with Religion as such, except in so far as it studies the causes that lead to a sublimatory effort of which Religion is the result. Miss Bradby, however, is on the whole to be congratulated on the service which she has rendered to all those who wish to approach the minds either of themselves or of others in a scientific spirit, and she has displayed considerable zeal in her self-imposed task. At the same time this very zeal has occasionally betrayed her, as in the quite original but wholly amateurish analysis of Hamlet. A complete analysis would have revealed the operation of the Law of Opposites, instead of a homosexual complex. Hamlet's apparent affection for his father veils in reality an unconscious jealousy of his father as a rival for his mother's love.

Less pretentious in his methods, Mr. Lay is of the order of legitimate propagandists, who rely for the strength of their propaganda, rather on the subject itself than on externals, however attractive. His books seem to be at once popularly and exhaustively written: exhaustively in the sense that no important point in Freudian psychology has been omitted. Where all is good, it is perhaps invidious to select chapters for special praise, but we would call attention to that on the "Two Kinds of Thinking" (Man's Unconscious Conflict).

In "The Child's Unconscious Mind" Mr. Lay explains how present-day education fails of full success by neglect of the unconscious mind, to tap and direct whose energy ought to be the main function of the educator. The chapter on the "Psychological Negative" is specially to be commended to the notice of the teacher. "There is no such thing as a psychological negative" (p. 37). "To tell a child not to do what it is doing is equivalent to saying 'I see you are doing that.'" "The only way to abolish an idea or stop an action is to replace it with another idea" (p. 38). The pages on the "Influence of Parents" should do much to widen the outlook both of the parent and of the teacher who in school life becomes identified with the Parent Imago in the child's mind. It is a pity that the author in an important passage (p. 114) confounds identification with love.

Mr. Lay's book should prove a valuable contribution for the educationalist whether in the home, in school, or in the broader fields of life, and he is to be congratulated on the courageous attempt which he has made to explode time-worn methods.

Dr. White writes as a physician of standing in mental medicine and as a philosopher who has looked in many directions for keys to open the door to the understanding of man. The preface states the object of his book to be "to give in outline" "the psychology which is called psychoanalysis and, no matter what the remote history of events preceding its birth, properly also bears the name of its real creator, Prof. Sigmund Freud". It is, curiously enough, not as a specialist who has played his part in the "history" referred to that he is most hampered in stating the Freudian psychology, but as a philosopher too anxious to restate his view of man's place in the universe in the light of Freudianism to have time first to explain carefully what Psycho-Analysis is. Although on the one hand Dr. White's interest seems to be mainly philosophical and on the other hand he writes in a diffuse rather than a concentrated style (thus T. E. Frazer's

"Golden Bough" appears more frequently in the footnotes than any other work), much of his book does nevertheless deal with Freudian technique as such. Of this part we would say that the chapter on Conflict, leaving aside the philosophical generalisations, is quite admirable. The "Family Romance" (Ch. VII) directing attention to the Incest Motive in the Unconscious Mind and "Partial Libido Strivings" (Ch. IX) should prove helpful to the beginner. We can, however, say little that is good of the chapter on Symbolism, which appears to us quite confused and ambiguous, a confusion which is moreover the more unpardonable as the doctrine under discussion is a central one of Psycho-Analysis.

The statement that the unconscious directs and guides (p. 98) is misleading, while the appearance on one and the same page (p. 92) of the statements, that the unconscious is, on the one hand "uncritical" and, on the other, "strictly logical" is likely to prove most confusing to the reader.

The eclectic character of Dr. White's book is most unfortunately in evidence in this chapter with its attempt to present the sexuality of symbolism in the Freudian sense side by side with a symbolism which becomes "spiritualised" (p. 99). The appearance of varieties of interpretation at different levels, "superficial" (p. 105), "anagogic" (p. 106), "psycho-analytic where one term of the symbolism is in the unconscious" (*ibidem*), neither serves to illustrate Freud nor harmonises with his doctrine.

We come now to the last of our five books, "Psycho-Analysis: A Brief Account of the Freudian Theory" by Miss Barbara Low. Miss Low, like Mr. Lay, is an educationalist, and like him she treats her subject in the direct manner. Unlike Mr. Lay, whose writing is at times deplorably loose, Miss Low has command of a crisp style, which makes her book, short though it is in comparison with those others, readable and suggestive. The author is not interested in embellishments and gives us the solid, dry and hard facts of the main theme and to some readers it might seem that Psycho-Analysis was the dullerest technique in existence, rather than the most interesting investigation of buried mental processes. This is much the soundest of the books under review, and there is not a word in it which we could wish altered; the novice, whether interested primarily as physician or as educator, may read on freely, for here he will find nothing to be unlearned later.

Miss Low's book has moreover the characteristic of quoting Freud himself more extensively than these other books. Miss Bradby and Dr. White, who both quote profusely and illustrate even more profusely, mention Freud but rarely. Miss Low's chapter on "Repressions" is simply admirable; the thoughtful adult will read it with great advantage to his own sublimatory processes. The final chapter on "Social and Educational Results" is full of suggestiveness for the teacher and the social worker; the former will read with very special interest Freud's view of his potential importance as "analyst-educator" (p. 180) and Freud's statement of the educational process as "incitement to the mastering of the Pleasure-principle, and to the replacement of this principle by the Reality-principle". Here he will recognise in another guise the old statement in terms of active attention, the freshness and vitality of the new statement arising from the substitution of a dynamic psychology (in place of a discarded static psychology), in terms of which the formal statement of the process is made.

ESTELLE MAUDE COLE

REPORTS OF THE INTERNATIONAL PSYCHO-ANALYTICAL ASSOCIATION.

SIXTH CONGRESS OF THE INTERNATIONAL PSYCHO-ANALYTICAL ASSOCIATION

September 8—11, 1920.

MINUTES OF BUSINESS MEETINGS.

THE INAUGURAL MEETING of the Congress was held on Sept. 8th, the President of the Association, Dr. Ferenczi, being in the chair.

Dr. Ferenczi and Dr. Ernest Jones (acting President of the Association) reported on the work and prospects of the Association

Dr. Ferenczi moved that his acceptance of the "Swiss Society for Psycho-Analysis" and "British Psycho-Analytical Society" as constituent branches of the Association be confirmed. This resolution was passed unanimously.

Dr. Abraham and Dr. Eitingon reported on the work of the Berlin Psycho-Analytical Clinic.

Prof. Freud and Dr. Rank reported on the work and prospects of the International Psycho-analytical Press.

Dr. van Emden, Dr. Stern and Dr. Pfister reported on the progress of the psycho-analytical movements in Holland, America and Switzerland respectively.

THE BUSINESS MEETING was held on Sept. 11th, Dr. Ferenczi being in the chair.

1) Dr. Ferenczi moved that the Congress ratify all changes and additions in the Statutes of the Association made since the Nürnberg Congress in 1910 (and already published in the "Zeitschrift für ärztliche Psychoanalyse", Vol. V, p. 142 ff.) together with the insertion of the words "eight shillings" after the words "eight marks" in Article V. The resolution was passed unanimously.

2) Dr. van Ophuijsen moved that the first article of the Statutes should be reworded to read as follows: — "The Association, as

constituting a central organisation of the national or local psycho-analytical societies (branch societies) already in existence or hereafter to be formed, shall be called 'The International Psycho-analytical Association'." The resolution was passed unanimously.

3) The proposal of Dr. Ernest Jones with regard to the subscription to "Imago" and the "Int. Zeitschrift f. ärztl. Psychoanalyse" — contained in his letter of Oct. 30th 1919 and published in the "Zeitschrift" Vol. V, p. 329 — was unanimously accepted.

4) Dr. Pfister proposed "that the Executive of the Association be instructed to investigate and report to the next Congress as to whether it would be possible to institute diplomas in Psycho-Analysis, and if so, under what conditions these diplomas should be granted". A discussion followed, in which Dr. Sachs, Prof. Freud, Dr. Abraham and Dr. Ferenczi supported the proposal while Dr. Liebermann and Dr. Eitingon raised objections on certain points. Dr. Pfister's proposal was eventually accepted, in conjunction with a proposal of Dr. Bryan, according to which each affiliated Society should discuss the questions involved and report to the Executive of the Association.

5) In connection with Dr. Pfister's proposal, Dr. Liebermann proposed "that the Congress shall decide what common points of view shall be taken into consideration as regards the election of members".

Following which, Dr. Jones made a proposal which, after some discussion, was accepted in a form given by Prof. Freud as follows: — "Election to membership of a foreign group shall be subject to the consent of the Central Executive."

6) Dr. von Hattingberg proposed that the conditions of membership should be discussed and decided at the present Congress. Prof. Freud proposed to postpone this discussion to the next Congress in connection with the discussion of the report on Dr. Pfister's proposal. Prof. Freud's proposal was unanimously accepted.

7) Dr. Rank explained the circumstances connected with the foundation of the "International Journal of Psycho-analysis". Dr. Stern and Dr. Bryan, as Secretaries of the New York and British Societies respectively, expressed their approval of the Journal in the name of their Societies. The meeting thereupon unanimously accepted the Journal as one of the official organs of the Association.

8) Dr. de Saussure and Dr. Pfister then proposed that all non-German speaking members should be permitted to subscribe to the "International Journal of Psycho-analysis" instead of to the two German journals, should they so desire. This proposal was accepted.

9) Prof. Freud thanked the English speaking Societies for their acceptance of the Journal and expressed his desire to hear the wishes of these Societies, particularly with regard to the question of editorship (remarking that Dr. Jones had been requested to act as editor provisionally until the time of the Congress).

After a discussion in which Prof. Freud, Dr. Pfister, Dr. Bryan, and Dr. Jones took part it was agreed that Dr. Jones should be the editor, with the assistance of an editorial committee, to be appointed later, consisting of three American and two British members.

10) The place of the next Congress was then discussed. Invitations were received from Berlin and Switzerland (conveyed by Dr. Abraham and Dr. Pfister respectively).

Dr. Jones pointed out the priority of the invitation from Berlin, upon which Dr. Pfister withdrew his invitation and the Berlin proposal, being supported by Prof. Freud, Dr. Stern and Dr. Stoddart, was unanimously accepted. Dr. Liebermann thanked the Congress in the name of the Berlin Society.

11) There followed a discussion as regards the date of the Congress. Prof. Freud proposed that the decision on this matter be left to the Executive. This proposal was accepted. Dr. Abraham thereupon proposed that a vote be taken in order to indicate whether the meeting desired that the Congress should be held in 1921, should circumstances appear favourable. On such a vote being taken, there resulted a large majority in favour of the Congress being held in 1921.

12) Dr. Rank made invitations and proposals as regards coordinating the work of making abstracts and reports for the Journals.

Dr. Jones proposed that each affiliated Society should elect a special corresponding Secretary for this purpose. This proposal was accepted.

13) Dr. Ferenczi proposed the question of the election of President of the Association and resigned the Chair in favour of Dr. Stoddart.

Dr. Abraham proposed Dr. Jones as President.

Prof. Freud supported Dr. Abraham's proposal and in so doing referred to the eminent services rendered to the Association by Dr. Ferenczi during the recent difficult period of the Association's history and to the unfortunate circumstances which had necessitated his resignation of the actual duties connected with his office.

In connection with Prof. Freud's remarks, Dr. Eitingon in the name of the Berlin Society offered honorary membership of that Society to Dr. Ferenczi. Dr. Ferenczi thanked Dr. Eitingon for the offer and expressed his pleasure in accepting.

Dr. Abraham's proposal was then put to the vote and carried unanimously.

14) Dr. Jones, having been elected President, took the chair expressed his thanks to the Congress and inquired whether any member desired any further points to be discussed.

Dr. Spielrein proposed that the official Journal of the Association should contain a) abstracts from Russian works, b) articles in Russian.

Dr. Eitingon said that it was important to collect Russian literature bearing on Psycho-analysis and to translate the more important matters contained in this literature.

Dr. Reik maintained that the cost of printing was too great to permit of the publication of articles in Russian for the present.

Prof. Freud stated that this matter did not concern the Congress, but promised that the Foundation would deal with the points that had been raised.

15) No further matters being brought forward for discussion, Dr. Jones announced his intention to elect Mr. Flügel to the post of General Secretary of the Association, and thereupon declared the meeting closed.

AMERICAN PSYCHOANALYTIC SOCIETY

The annual meeting of The American Psychoanalytic Society was held in New York City on June 4, 1920, under what appeared at first unfavorable auspices. The President, Dr. Brill, had difficulty in awakening interest in the forthcoming meeting, and he had also heard that some of the members thought it advisable to discontinue the Society in that it had outlived its usefulness. In place of the official organization it was suggested that informal gatherings yearly should be instituted, at which those interested

would attend and discuss topics of psychoanalytic interest. It developed that the reason given for the discontinuing of the organization was that since psychoanalysis had made such strides in this country, the so-called propaganda function, originally perhaps a very important function of the American Psychoanalytical Society, was now unnecessary. At the meeting this reason was brought forward by one member only, and a frank statement of the opinion of the rest of the members present was unequivocal for the continued existence and growth of the society.

In his presidential address, Dr. Brill, among other things, suggested that at the next meeting the society devote its time to the presentation of work done along lines mapped out at the present meeting, for instance that several members volunteer to report work done on the narcissistic neuroses as offering a fruitful field for investigation. Or any other important aspect may be taken up, provided the members be made acquainted with the subjects to be discussed in sufficient time for long preparation.

Following these general considerations, the scientific program was taken up.

The first paper, by Dr. John Mc. Curdy, was the presentation of some of the difficulties and interesting features encountered in the analysis of a patient suffering from a hysteric or mild psychotic depression, frequently recurring, and of short duration.

The patient, thirty-six years old, was a very austere, plain woman, indifferent to men. She lost both parents very early in life; from 12 to 17 she spent her time with an aunt, whose husband treated patient as an outsider. The first depression followed detecting a young man peeping at her through the key-hole; the next attack followed an attempt on her part to establish her independence by teaching. Later attacks resulted when she was through with her training for nursing, usually on account of quarrels with the head nurse or female superintendent of nurses. Besides the depression were present irritability, self-accusative thoughts, and various compulsive ideas. Fugues, with confusion as to nature of acts committed therein, accompanied the attacks at times.

The chief difficulty encountered by Dr. McCurdy was with the transference, as it came up in connection with a dream, associations to which led to thoughts of guilt, innocence, and loss of innocence, referred in part to the analyst. An attempt on the part of the analyst to explain to the patient the transference

phenomena as evidenced in her associations caused in her the delusion that she was a bad woman, a prostitute, and that the analyst thought the same of her. She later, in several fugues, made sexual advances to men, but on no occasion to the extent of sexual indulgence. She also developed compulsive thoughts regarding the red light district. Following the first attempt to explain the transference phenomena, the patient always, in the sittings, was in sleep or hypnoid state, in which the prostitute complex, early birth phantasies, and evidences of a strong father attachment were disclosed by the patient. Therapeutically, the state proved of no value, for no progress in clearing up the transference difficulties was made, nor were these associations, obtained in the hypnoid state, made conscious to the patient.

In the discussion the members agreed in the main that the patient was of a psychotic make-up. It was also pointed out that the question for primary consideration was that concerning the transference. Failure on part of the patient to bring properly to her consciousness the realization that in the person of the analyst the attachment to the father was manifested; further her inability to realize the nature of her delusion, and to accept the prostitute delusion as her infantile incestuous or sexual longings, constituted the difficulties. One might say that the analyst served as the object of the desires, as the father had done in the early childhood of the patient, and that the narcissistic make-up of the patient prevented an analysis of the transference, so as to make the nature of it conscious and at the same time accepted by the patient, without self reproach. It was also pointed out that the analysis of such patients may apparently do harm, in that repressed conflicts and complexes are made conscious to the patients without the ability on their part to accept and adjust accordingly.

The second paper was read by Dr. L. Pierce Clark of New-York; its subject was "A clinical study of some mental contents in epileptic attacks." Dr. Clark deduces from the dreams of neurotic, from the spontaneous productions of fever and drug patients, from novelists' description of brain fever or delirium in their characters, material comparable to the productions of the epileptic in the state of attack. The productions of the epileptic, however, are cryptic, vague and disjointed. Dr. Clark believes that in this way an approach can be made to the nature and defect in the epileptic, and a more rational individual therapy made possible. His egoist

nature, desire for domination and conquest, crude strivings, his individuality, rigid to all life reactions, all these make an approach, both from the point of view of therapy and investigation very difficult. The information gathered from the patients is usually in the form of question and answer, and frequently questioning the patient arouses him to full consciousness, and a complete block to further approach is brought about. All the productions show intense egocentric strivings of primitive type.

A characteristic illustration is the following; a patient while engaged in wood-carving had a petit mal and attempted to climb up the slanting side of the cold air box in the basement. He said, "I will stick it in — stick it in here." Continuing to climb he kept repeating, "Give it to me — It's coming — quick — What the hell is wrong? Hurry up! — I can't hold it — hurry." In a gradually increasing excitement he cried "Hold on, hold on: Quick now, get it, get it." Ceasing his efforts to climb, he lay on his side against the box exhausted. He regained consciousness, looked at his soiled clothes and grinned sheepishly and said "Why, what's the matter?" Dr. Clark thinks that this episode is symbolically a sexual assault, and "that the petit mal liberated the unconscious dramatization of an erotic desire."

Dr. Clark thinks that in epilepsy "we have an expression not only of an exhibition of crude sexuality but an apparent defect of the instinct itself" and must on that account give our patients "an acceptable sublimation and educational training to help them to a life of effort and pleasure compatible with the inherent defects of the instincts which they possess."

In the discussion it was suggested that with such epileptics as present no mental content or transitory deliria, the production of artificial dreams, as is at times done in psychoanalytic work, might be resorted to with benefit. Some exception was taken as to the defective nature of the sexual instinct in the epileptic. It was suggested that the sexual instinct was of a very primitive, and that the ego strivings were of this nature, of an archaic type.

*

The following members were present:

Dr. White of Washington, Meyer and Taneyhill of Baltimore, Emerson of Boston, Brill, Frink, Jelliffe, McCurdy, Oberndorf, Stern of New York.

ADOLPH STERN.

NEW YORK PSYCHOANALYTIC SOCIETY.

Meeting, held Jan. 27, 1920.

Subject of the evening "Studies in Paranoia", by Drs. Bernard Glueck and Mary K. Isham.

The paper of Dr. Glueck describes a case of Dementia Precox, paranoid type, in a negro, twenty-eight years of age, who had shown definite symptoms for at least two years before his admission to a hospital for the insane in April, 1915. The early history of the patient is that of a very precocious and active sexual boy, the sexuality embracing bestiality, and homo- and hetero-sexual practises, with a frank sexual attempt upon his mother at the age of seven, for which he was severely punished. Following this he turned to homo-sexual practises. During his college career and also later, he indulged in both hetero- and homo-sexuality, actually and in his phantasy life, full gratification in the hetero-sexual sphere being possible only when in his phantasy his mother or his sister was the sexual object. The paranoid ideas appeared only when for any reason the patient was unable to gratify his conscious homo-sexual desires. The reader of the paper laid great emphasis on this point, ascribing to the conflict of the patient in regard to his conscious homo-sexual desires, or his denying himself indulgence in them, the cause of the paranoid state.

In the discussion of Dr. Glueck's paper, it appeared that other members of the society felt as did the reader of the paper, that a conscious homo-sexual desire may enter into the formation of paranoid states, and Drs. Farnell and Skversky instanced cases bearing upon this point. Drs. Frink, Brill, Isham and Stern called attention to the fact that Freud referred to the unconscious homosexual component in a consciously hetero-sexual individual as that which enters into the formation of the paranoid delusion.

The second paper was read by Dr. Isham. This consisted of a case report of a woman suffering for many years from a paranoid delusional state in which she tries to prove that she is descended from a queenly line of blond-haired women, and also that the Purkinje cells of the cerebrum had a sexual function. The patient at no time developed true delusions of grandeur, nor was jealousy a prominent characteristic or symptom. The paranoid mechanism was traced back by the reader of the paper to the identification

on the part of the patient in her very early childhood, with her mother; also that the patient had been cursed in utero, so that, unlike the other women of the family, who were blond-haired, she was black-haired; this was the basis of the sense of inferiority, in the aid of which she developed delusions in the form of the two above mentioned.

The criticisms consisted essentially in that the patient did not show definite homosexual wish phantasies (unconscious).

Meeting, held Feb. 24, 1920.

Papers by Drs. Farnell and Blumgart.

The paper of Dr. Farnell consisted of the description of the very unscientific, non-medical, wholly punitive treatment at one of the naval stations in this country, accorded to some of the enlisted men who were suspected of homo-sexual practises. As a very satisfactory contrasting picture was the work at many of the army camps, where all such cases were scientifically handled by the Psychiatrial Division.

Dr. Leonard Blumgart reported a case of *Hysteria with auditory hallucinations*; duration five days; spontaneous cure. This case was reported because the episode was precipitated by the use, for about one month, of the "Ouija Board" and automatic writing. The spirit messages from the "Ouija Board", the automatic writing and the manifestations during the acute stage, were easily shown, through the associations of the patient, to be the breaking through of the patient's repressed unconscious wishes and impulses. The recalling of the wishes and impulses originally repressed, abreacting the emotions connected with them, resulted in further adjusting the patient.

This case thus furnishes additional evidence that the source of the messages so largely used in Spiritualism is the unconscious and the mechanisms of their production is similar to those used in the production of dreams and symptoms. The patient has been well now (February, 1920), for two years. (Author's abstract).

Meeting, held March 30, 1920.

Papers by Drs. Isham and Oberndorf.

The paper by Dr. Isham was entitled "Studies in Paraphrenia". This consisted in the report of several cases, in some respects different,

similar in that they all presented the feature of being inaccessible, the nature of the inaccessibility not being the same in all of them. One of the patients lacked the ability to form identifications, not having passed the animistic stage, manifesting fright in the attempt to identify. The second patient did identify, but could not objectify. A third could do both, but a transference was only partial. A fourth patient was an apparently intellectual man, in whom only repeated examination revealed that in one respect he was decidedly introverted, and therefore inaccessible. The patients in general showed the narcissistic component as an important factor in the psychosis. Exhibitionism, as a component of narcissism, contributed to the difficulty. These patients had great difficulty in moving in hetero-sexual environment.

In the discussion, the importance of recognizing the condition was brought out, for on it depended the prognosis. As far as any of the members had any experience with these cases, therapeutic results were unsatisfactory. Psychoanalysis was a valuable means for the study of such patients.

Dr. C. P. Oberndorf presented a case of amnesia in a man of twenty-nine years of age. He was a patient of decidedly psychopathic make-up who had spent a very unhappy childhood on account of the domestic infelicity of his parents which subsequently resulted in their separation. In order to escape from his irksome home surroundings he was accustomed to take long solitary walks into the country and during his adolescent period plunged quite heavily into alcoholic and gambling excesses. At the age of twenty-five he married and about two years after this event experienced an attack of amnesia during which he forgot completely all the persons and events connected with his life for the time preceding. After repeated hypnosis Dr. Oberndorf succeeded in restoring the patient's memory.

The patient remained well for one year when he again became amnesic and wandered from New York to Baltimore. His memory returned for a few hours, but then he became mute, deaf and amnesic. The deafness vanished spontaneously but the amnesia and muteness persisted until they disappeared as the result of hypnosis. Dr. Oberndorf interpreted the symptoms as being unconscious wish fulfillments in that they permitted the patient to escape from many disconcerting circumstances of his daily life. (Author's abstract).

In the discussion it was suggested that the patient in his fugues may be manifesting the psychic equivalent of an epileptic attack. It was also remarked that the complete change in the personality, in conjunction with the amnesia, is similar to the co-conscious state described by Prince, and that this state was not identical with hysteria as we so often see the latter condition..

Meeting, held May 24, 1920.

The paper of the evening was by Dr. Smith, of a general nature, an abstract of which is given by the author as follows.

The writer began his paper by pointing out the various views that have been held concerning the nature of Dementia Praecox. The study of Dementia Praecox from the viewpoint of Freudian psychology he regards as an attempt to generalize the Freudian conception. This striving after generalization is an inherent faculty of the human mind and corresponds to an innate desire to seek oneness in cosmic phenomena. The writer, while admitting the fruitfulness of such endeavours, warned against the pitfalls — the tendency to dogmatism and to onesidedness which they bring about. The discovery of Freudian mechanisms in the psychoses, epilepsy, etc., has had also the consequence that the psychical side is overemphasized, the physical undervalued. The analysis of Dementia Praecox did not enlighten us as to the innermost nature of this disease and Bleuler, one of the clearest thinkers on psychiatric matters, had to assume an anatomic substratum. The introduction of Freudian conceptions into the psychopathology of Dementia Praecox has resulted in the drawing of a too close parallel between psychosis and neurosis. Practical experience teaches us that they are separate entities. Psychoanalysis is inapplicable to the majority of psychoses of Dementia Praecox type. The writer had no desire to subject to criticism psychoanalysis, a method which has been universally acclaimed and the fruitfulness of which nobody will deny, but felt justified in indicating its practical limitations.

Joseph Smith.

In the discussion which followed the reading of the paper, it was pointed out that in his studies on Dementia Praecox, Bleuler acknowledges the debt he owes to Freud for the latter's studies in the pathology of the disease. Bleuler himself has much to say for the psychic factors, while not granting to them the entire etiological role. It was also mentioned that Freudians agreed that Dementia Praecox is from the psychoanalytic standpoint, therapeutically unapproachable. Psychoanalytic investigations have thrown

much light on the psychic make-up of the D. P. individual. It appeared to many of the members that the lack of experience and training on the part of the writer was the cause of his unfavorable attitude to the value of psychoanalysis in the study of the psychoses. Mention also was made of Freud's classification of the neuroses into the narcissistic and transference groups which greatly aided in understanding the underlying phenomena present.

HISTORY OF THE DUTCH PSYCHO-ANALYTICAL SOCIETY

The Dutch Psycho-Analytical Society — an official section of the International Psycho-Analytical Association — was founded in March 1917 by a number of medical men, who had studied psycho-analysis and who had previously met in each other's homes for discussion of psycho-analytical subjects.

The first meeting was held on April 28th, 1917 in Amsterdam. In his presidential address Dr. A. W. van Renterghem, the Nestor of Dutch psycho-therapeutical practitioners, reviewed the development of the psycho-therapeutical methods. Dr. J. van der Hoop then read a paper on "The Psycho-Analytical Method" which was afterwards published in the *Nederlandsch Tijdschrift voor Geneeskunde* (Dutch Journal of Medicine).

Shortly after its inception the Society suffered a great loss in the sudden death of its Secretary, Dr. Joh. Stårcke, whose work was commemorated by the President at the funeral and at the next meeting of the Society.

At a meeting on June 23rd 1917, Dr. J. H. W. van Ophuijsen read a paper on „The Virility-Complex in Women”, afterwards published in the *Internationale Zeitschrift für Ärztliche Psychoanalyse*, Vol. IV, p. 241.

At a meeting held in Amsterdam, on Sept. 22nd, 1917, a discussion was held on Dr. van der Hoop's paper "The Psycho-Analytical Method" read at the first meeting. The majority of the members disagreed with some of the conceptions of Jung defended by Dr. van der Hoop and joined the criticism of those conceptions published by Freud, Ferenczi, Jones and Abraham.

At a meeting on Nov. 4th 1917 at The Hague papers were read by Dr. Adolph F. Meijer and Dr. van Ophuijsen on "Homosexuality" and "Wish-Fulfilment" respectively.

At the last meeting of the first year, on Dec. 16th, 1917 at Amsterdam, Dr. Adolph F. Meijer read a paper on Jung's book "Die Psychologie der Unbewussten Prozesse". He expressed the opinion that Jung had not fully understood the significance and extent of Repression and therefore (far from having outdistanced Freud as he supposed) had in reality not yet attained to Freud's position. This paper was published in the *Internationale Zeitschrift für ärztliche Psychoanalyse* Vol. IV, p. 302.

In 1918 only three meetings were held. The first, on Feb. 17th in Amsterdam, was opened by Dr. van Ophuijsen with some "Casuistical Communications" after which Dr. A. van der Chijs read a paper on "Hallucinations and Psycho-Analysis".

At a meeting on March 24th Dr. J. E. G. van Emden read a paper on "Analysis of a Sensation in Dreams" and Dr. A. Stärcke on "Psycho-Analytical Roots of the Hysterical Love of Exaggeration".

At a meeting on Nov. 3rd, 1918, at The Hague, Dr. van Emden and Dr. van Ophuijsen gave a brief report of the International Psycho-Analytical Congress at Budapest, Dr. J. H. van der Hoop thereafter reading a paper on "A Case of Dementia Praecox".

At the first meeting of 1919 the members of the Committee retired, Dr. J. E. G. van Emden being thereupon elected President, Dr. Adolph F. Meijer Secretary and Dr. J. H. W. van Ophuijsen Treasurer.

A Report of the five meetings held in 1919 was given in the first number of this Journal (p. 121).

The Society possesses a library, which is steadily increasing and of which physicians and students of medicine are permitted to make use. It is under the care of Professor K. H. Bouman at the Psychiatrial and Neurological Department of the Wilhelmina Hospital in Amsterdam, of which he is Director.

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